

August 13th, 2020

David Allen Beloit Auction

Re: 14171 S Bluff Rd, Rockton, IL 61072

Dear Mr. Allen,

As you requested, the sewage disposal and potable water systems at the above address, were evaluated on August 9th, 2020.

Septic System: A 20 minute shock load test was conducted on the sewage disposal system and found the system <u>flowing and functioning normally</u> at that time. I was unable to locate the location of the drain field. I did measure 12 inches of sludge & scum inside the septic tank, indicating the tank needs to be pumped out and the baffles inspected for integrity. It is also noteworthy that the dwelling has not been recently occupied on a steady basis. Septic system inactivity, can on some occasions, mask a failing or near failing condition. However, this test in no way warrants the system will continue to perform properly. Tank additives, which claim to enhance septic tank function, do NOT remove the need for periodic pumping. Generally, a septic system serving a year-round resident should be pumped every three years and the baffles inspected at that time for integrity.

Well: During the course of the evaluation, I made a review of the potable water system that consisted of a drilled well located north of the home. There were no obvious mechanical defects and the system appears to be in good working condition at this time. In addition, a water sample was collected. The results indicate that the water was <u>negative</u> for coliform bacteria and is considered satisfactory. The nitrate-nitrogen content in the water sample was 4.30 mg/L as Nitrogen, <u>below the action level</u> of 10 mg/L.

In closing, the scope of this inspection was limited to the well & private sewage disposal system serving this property. Furthermore, this inspection in no way warrants or guarantees that the well & private sewage disposal system will continue to operate satisfactory in the near or present future.

If you have any questions, please do not hesitate in giving me a call.

Sincerely,

Chris R. Schuler

Chris R. Schuler, BS, Licensed Environmental Health Practitioner, License # 183-000558

| 1111 Cedar Rockford, I 779-348-71 | Illinois 61102 | waler | 1 | 000° 4600° 00° 401 401 4000° | ord Wa menta | 1 - CO - C | 60° 63 600° 61 401 | p 40 00 | | Colifor | m Analysis Report | | |
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| C. Sampling Period: | | | | | | | AUG 10 AM 8: | | | | | | |
| | | | | | | Date/Time Rec'd: Date/Time Set Up: | | | | | AUG 10 AM 9:52 | | |
| Samples must | t reach laboratory within 30 hours after | collection | | | | me Rea | | | | AU | IG 11 AM10:1 | 9 2 8 | |
| and a state of the state of the state | 6 must be completed or sample may be Water Supply Copy | | ter aktor de Ter Friderice del Marcol de | | Date | 3. Date | | cted: | 0.0/ | 09/2 | 0 | | |
| | Chris Schuler | | | | | 4. Samp | | llector | The second second second | 09/2 | 0 | | |
| Addres | | - | | | | Chris | | | | l. | | | |
| | P.O. Box 225 | 2 | | | | 5. Samp | le Pu | rpose: | | Rout | ine 🔀 | | |
| City: | Loves Park IL | 61131 | | | | Replaceme Repeat Follow-Up | ent 🗌 | li | nvalid Re New Co | | | | |
| Name: | tact for Unsatisfact Chris Schuler chris.schuler1@ | Pho | ne: 815. | 520.34 | 432 | Original La Boil Order Repair New Const | | Other | Ma | | | | |
| 6. Col | liform Sampling: | | | | | d | 7. | 8. | 9. | 10. | 11. | . 1 | |
| Bottle# | Sample Site# | or Addres | s | Sample Type | Time Collected | Res. Cl. F or T | Col Read | Total Coli | Fecal/ Ecoli | Opin | Laboratory Sample No. | | |
| 1 | 14171 S Bluff Rd, | Rockton. | IL | Bacti | 12:15 pm | | | X | A | 3 | Crozz43 | | |
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| 6 | | | | | | | | <u> </u> | + | + | | | |
| | Samples Request | ted: | | L | | | | L | 1 | | | | |
| Bottle# | Sample Site# | or Addres | s | Sar | nple Type: | (Circle) | | | | | | | |
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| 2 | | | , 12 0107 | N | itrate - | Lead - | Hardne | ess | Result | | 11pm | | |
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| 5 | | | | | And the second day of the second s | langanese Lead - | - pl Hardne | | Result | | | | |
| 6 Method: | Membrane Filter | adycult X | 1 | | | langanese | - pl | | Result | State State State | | | |
| Analyst: | Ro | | | Legend: P = Preser A = Not Pre S = Satisfa | No. of Bottles at esent ctory | Sent: | | Reason f | f or Replace more than | Date: _ ement: 30 hours | old | | |
| Lab Cert. | 17597 | | | U = Unsati | sfactory | | | No Date/ | Time of Col | lection | | | |