

<b>Well Construction Report</b> <b>WISCONSIN UNIQUE WELL NUMBER</b>				<b>YG778</b>		<b>Drinking Water and Groundwater - DG/5</b> Department of Natural Resources, Box 7921 Madison WI 53707				Form 3300-077A	
Property Owner NORTHWOODS MOTEL					Phone #			<b>1. Well Location</b>			Fire # (if avail.)
Mailing Address 9854N STATE RD 27					Town of HAYWARD			9854			
City HAYWARD				State WI	Zip Code 54843		Street Address or Road Name and Number				
9854N STATE HWY 27				Subdivision Name			Lot #	Block #			
County	Co. Permit #	Notification #		Completed		Latitude / Longitude in Decimal Degree (DD)			Method Code		
Sawyer		43822594		04-23-2012		°N °W					
Well Constructor (Business Name)				Lic. #	Facility ID # (Public Wells)		NW SE Section Township Range				
BUTTERFIELD INC				7115	858130460		or Govt Lot # 33 41 N 9 W				
Address 14346 W ST RD 77 HAYWARD WI 54843-9790				Well Plan Approval #		Approval Date (mm-dd-yyyy)		<b>2. Well Type</b> Replacement			
Hicap Permanent Well #				Common Well #	Specific Capacity		of previous unique well # JB377 constructed in 1981				
					5		Reason for replaced or reconstructed well ?				
<b>3. Well serves</b> 1 # of MOTEL				Hicap Well ?		No		NOT PRODUCING ENOUGH WATER			
Non-community				Hicap Property ?		No		Construction Type Drilled			
Heat Exchange ___ # of drillholes				Hicap Potable ?							
<b>4. Potential Contamination Sources - ON REVERSE SIDE</b>											
<b>5. Drillhole Dimensions and Construction Method</b>						<b>8. Geology</b>					
Dia. (in.)	From (ft.)	To (ft.)	Upper Enlarged Drillhole		Lower Open Bedrock	Geology Codes		<b>8. Geology</b> Type, Caving/Noncaving, Color, Hardness, etc...		From (ft.)	To (ft.)
8.75	Surface	126	<u>Yes</u> Rotary - Mud Circulation .....		<u>No</u>	-	-	I	-	Surface	1
			<u>No</u> Rotary - Air .....		<u>No</u>	-	A	S	-	1	25
			<u>No</u> Rotary - Air & Foam .....		<u>No</u>	-	A	Y	-	25	126
			<u>No</u> Drill-Through Casing Hammer								
			<u>No</u> Reverse Rotary								
			<u>No</u> Cable-tool Bit ___in. dia...		<u>No</u>						
			<u>No</u> Dual Rotary .....		<u>No</u>						
			<u>No</u> Temp. Outer Casing ___in. dia								
			<u>No</u> Removed? ___depth ft. (If NO explain on back side)								
<b>6. Casing, Liner, Screen</b>						<b>9. Static Water Level</b>			<b>11. Well Is</b>		
Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly			From (ft.)	To (ft.)	21 ft. below ground surface			14 in. above grade		
5	EAGLE PVC 1120SDR21 200PSI ASTM F480			Surface	123	<b>10. Pump Test</b>			Developed ? Yes		
Dia. (in.)	Screen type, material & slot size			From (ft.)	To (ft.)	Pumping level 23 ft. below surface			Disinfected ? Yes		
3	18 CONTINUOUS SLOT STAINLESS STEEL			123	126	Pumping at 10 GP M for 2 Hrs.			Capped ? Yes		
<b>7. Grout or Other Sealing Material</b>						Pumping Method ?					
Method TREMIE PIPE-PUMPED						<b>12. Notified Owner of need to fill &amp; seal ?</b>					
Kind of Sealing Material			From (ft.)	To (ft.)	# Sacks Cement	Filled & Sealed Well(s) as needed? Yes					
HIGH SOLID BENTONITE GROUT			Surface	120	14 S						
<b>13. Constructor / Supervisory Driller</b>						Lic #	Date Signed				
TAB							04-27-2012				
<b>Drill Rig Operator</b>						Lic or Reg #	Date Signed				
JSM							04-27-2012				

**4a. Potential Contamination Sources**Is the well located in floodplain ? No

Type	Qualifier	Distance	Type	Qualifier	Distance
POWTS dispersal component (soil absorption unit or mound)		65	Building Overhang		20
			Septic or Holding, or POWTS Tank		60

Comment:

Water Quality Text:

Water Quantity Text:

Difficulty Text:

Created On: 05-03-2012

Created by: WELL CONST LOAD

Updated On: 10-06-2015

Updated by: PWS TRANSFER



Safety and Buildings Division  
201 W. Washington Ave., P.O. Box 7162  
Madison, WI 53707 - 7162  
(608) 266-3151

County Sauyer  
Sanitary Permit Number (to be filled in by Co.)  
528603  
State Plan I.D. Number  
1597 982  
Project Address (if different than mailing address)

### Sanitary Permit Application

In accord with Comm 83.21, Wis. Adm. Code, personal information you provide may be used for secondary purposes Privacy Law, s15.04(1)(m)

#### I. Application Information - Please Print All Information

Property Owner's Name  
Northwoods Motel  
Dennis & Mary Wallace

Parcel # Lot # Block #  
010-941-33-4205

Property Owner's Mailing Address  
9854 N State Hwy 27

Property Location  
NW 1/4, SE 1/4, Section 33

City, State Zip Code Phone Number  
Hayward WI 54843 634 8088

T 41 N; R 9 (circle one)  
E or W

II. Type of Building (check all that apply)  
 1 or 2 Family Dwelling - Number of Bedrooms \_\_\_\_\_  
 Public/Commercial - Describe Use Motel 10 Bedroom  
 State Owned - Describe Use \_\_\_\_\_

Subdivision Name CSM Number  
 City  Village  Township of Hayward

#### III. Type of Permit: (Check only one box on line A. Complete line B if applicable)

A.  New System  Replacement System  Treatment/Holding Tank Replacement Only  Other Modification to Existing System  
B.  Permit Renewal Before Expiration  Permit Revision  Change of Plumber  Permit Transfer to New Owner  
List Previous Permit Number and Date Issued

#### IV. Type of POWTS System: (Check all that apply)

Non-Pressurized In-Ground  Mound ≥ 24 in. of suitable soil  Mound < 24 in. of suitable soil  At-Grade  Single Pass Sand Filter   
 Constructed Wetland  Pressurized In-Ground  Holding Tank  Peat Filter  Aerobic Treatment Unit  Recirculating Sand Filter   
 Recirculating Synthetic Media Filter  Leaching Chamber  Drip Line  Gravel-less Pipe  Other (explain)

#### V. Dispersal/Treatment Area Information:

Design Flow (gpd) Design Soil Application Rate (gpd/sf) Dispersal Area Required (sf) Dispersal Area Proposed (sf) System Elevation  
1065 .07 1522 1522 94.5

VI. Tank Info	Capacity in Gallons		Total Gallons	Number of Units	Manufacturer	Prefab Concrete	Site Constructed	Steel	Fiber Glass	Plastic
	New Tanks	Existing Tanks								
Septic or Holding Tank	<u>X</u>		<u>2000</u>	<u>2</u>	<u>Rasmussen</u>	<u>X</u>				
Aerobic Treatment Unit										
Dosing Chamber										

#### VII. Responsibility Statement- I, the undersigned, assume responsibility for installation of the POWTS shown on the attached plans.

Plumber's Name (Print) Plumber's Signature MP/MPRS Number Business Phone Number  
RAY Visocky [Signature] 230236 715 798-3885  
Plumber's Address (Street, City, State, Zip Code)  
10120 Cable Sweet Rd Cable WI 54821

#### VIII. County/Department Use Only

Approved  Disapproved  Owner Given Reason for Denial  
Sanitary Permit Fee (includes Groundwater Surchage Fee) 240.00 Date Issued 10/30/08 Issuing Agent Signature (No Stamps) Kelly Nechuta

#### IX. Conditions of Approval/Reasons for Disapproval

IMPORTANT NOTICE: Wisconsin State Statute, Chapter 145.245 (3), states you are required to have your septic tank pumped/inspected at least once every 3 years.

Attach complete plans (to the County only) for the system on paper not less than 8 1/2 x 11 inches in size

previous SAN 80-284, CST 80-339

11-6-08

OCT 28 2008  
SAYBEE COUNTY  
ZONING ADMINISTRATION

October 23, 2008

CUST ID No. 230236

ATTN: POWTS Inspector

RAYMOND J VISOCKY  
VISOCKY PLUMBING  
10120 CABLE SUNSET RD  
CABLE WI 54821

ZONING ADMINISTRATION  
SAWYER COUNTY SPIA  
PO BOX 676  
HAYWARD WI 54843-0676

**CONDITIONAL APPROVAL**  
**PLAN APPROVAL EXPIRES: 10/23/2010**

Identification Numbers
Transaction ID No. 1597982
Site ID No. 743395
Please refer to both identification numbers, above, in all correspondence with the agency.

**SITE:**

Northwoods Motel  
9854N State Hwy 27  
Town of Hayward  
Sawyer County  
NW1/4, SE1/4, S33, T41N, R9W

**FOR:**

Description: Conventional system, 9 motel rooms, 1 br res, 1 fd  
Object Type: POWTS Component Manual Regulated Object ID No.: 1204378  
Maintenance required; Replacement system; 1,065 GPD Flow rate; System(s): Conventional POWTS Component Manual, SBD-10567-P (R.6/99); Commercial System

The submittal described above has been reviewed for conformance with applicable Wisconsin Administrative Codes and Wisconsin Statutes. The submittal has been **CONDITIONALLY APPROVED**. This system is to be constructed and located in accordance with the enclosed approved plans and with any component manual(s) referenced above. The owner, as defined in chapter 101.01(10), Wisconsin Statutes, is responsible for compliance with all code requirements.

No person may engage in or work at plumbing in the state unless licensed to do so by the Department per s.445.06, stats.

The following conditions shall be met during construction or installation and prior to occupancy or use:

**Key item(s)**

- In the event this soil absorption system or any of its component parts malfunctions so as to create a health hazard, the property owner must follow the contingency plan as described in the approved plans. In addition, the owner must insure that the operation, maintenance and monitoring duties as described in the "In-Ground Soil Absorption Manual System" are complied with. A copy of this information must be given to the owner upon completion of the project.
- Comm 83.02. This approval covers only the domestic wastewater directed into the POWTS. The Department of Natural Resources must be contacted regarding the treatment and disposal of non-domestic wastewater, including those mixed with domestic wastewater. Please refer to the following website for more information: <http://www.dnr.state.wi.us/org/caer/cea/compliance/auto/wastewater.htm#septic>.
- This approval does not include plans for the general plumbing systems or sewer piping leading to the septic/holding tank that may be required for this project. See section COMM 82.20, Wis. Adm. Code, to determine if plan submittal and approval is required.
- The existing septic tank must be inspected for structural soundness, size and baffles and must be brought into conformance with the requirements of COMM 83, Wis. Adm. Code. If it does not conform a state approved tank must be installed.

P.O.W.T.S.  
**Conditional APPROVAL**  
DEPARTMENT OF COMMERCE  
DIVISION OF SAFETY AND BUILDINGS  
SEE CORRESPONDENCE

- The gravelless system components must be installed in accordance with the manufacturer's printed instructions, the plan approval, and COMM 83 system sizing criteria. If there is a conflict between the manufacturer's instructions and the plan approval, the plan approval and code requirements will take precedence.
- The designer proposes to install an outlet filter to achieve the requirement of wastewater particle size. Access to the filter for cleaning must be provided per ss. Comm 84.25 (7) and (8), Wis. Adm. Code product approval conditions. Maintenance information must be given to the owner of the tank explaining that periodic cleaning of the filter is required. The outlet filter shall be installed per product approval stipulations.

**Reminder**

- Materials shall conform to the requirements of COMM 84.
- Surface water drainage shall be diverted away from the system area.

A copy of the approved plans, specifications and this letter shall be on-site during construction and open to inspection by authorized representatives of the Department, which may include local inspectors. All permits required by the state or the local municipality shall be obtained prior to commencement of construction/installation/operation.

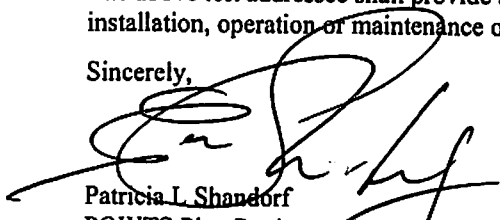
In granting this approval the Division of Safety & Buildings reserves the right to require changes or additions should conditions arise making them necessary for code compliance. As per state stats 101.12(2), nothing in this review shall relieve the designer of the responsibility for designing a safe building, structure, or component.

Beginning October 1<sup>st</sup>, 2008, small wastewater holding tanks with estimated flows less than 3,000 gpd that are based completely on approved POWTS component manuals must be submitted to the appropriate governmental unit and will no longer be accepted by the Safety and Buildings Division for review. Please refer to s. Comm 83.22, Wis. Adm. Code for further information.

Inquiries concerning this correspondence may be made to me at the telephone number listed below, or at the address on this letterhead.

The above left addressee shall provide a copy of this letter to the owner and any others who are responsible for the installation, operation or maintenance of the POWTS.

Sincerely,



Patricia L. Shandorf  
 POWTS Plan Reviewer, Integrated Services  
 (715) 634-7810, Fax (715) 634-5150, M-f 7:45 am - 4:30 pm  
 pat.shandorf@wisconsin.gov

Fee Required \$	225.00
Fee Received \$	225.00
Balance Due \$	0.00
WiSMART code: 7633	

cc: Carl J Lippert, Wastewater Specialist, (715) 634-3484

**GRAVITY CONVENTIONAL DESIGN**  
**Index and Title Sheet**

**Owner Name:** Northwoods. Motel  
Dennis & Mary Wallace

**Address:** 9854N State Hy 27  
Howard WI 54843

**Legal Description:** NW 1/4 SE 1/4 S33 T41N R9W

**Township:** Howard      **County:** Sawyer

**Subdivision Name:** \_\_\_\_\_ **Lot #:** \_\_\_\_\_

**Parcel ID #:** 010941-33-4205

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by  
**ED**  
MERCE  
BUILDING  
JNDENCE  
1597982

**Designer:** RAYMOND VISOCKY

**Signature:** Raymond Visocky

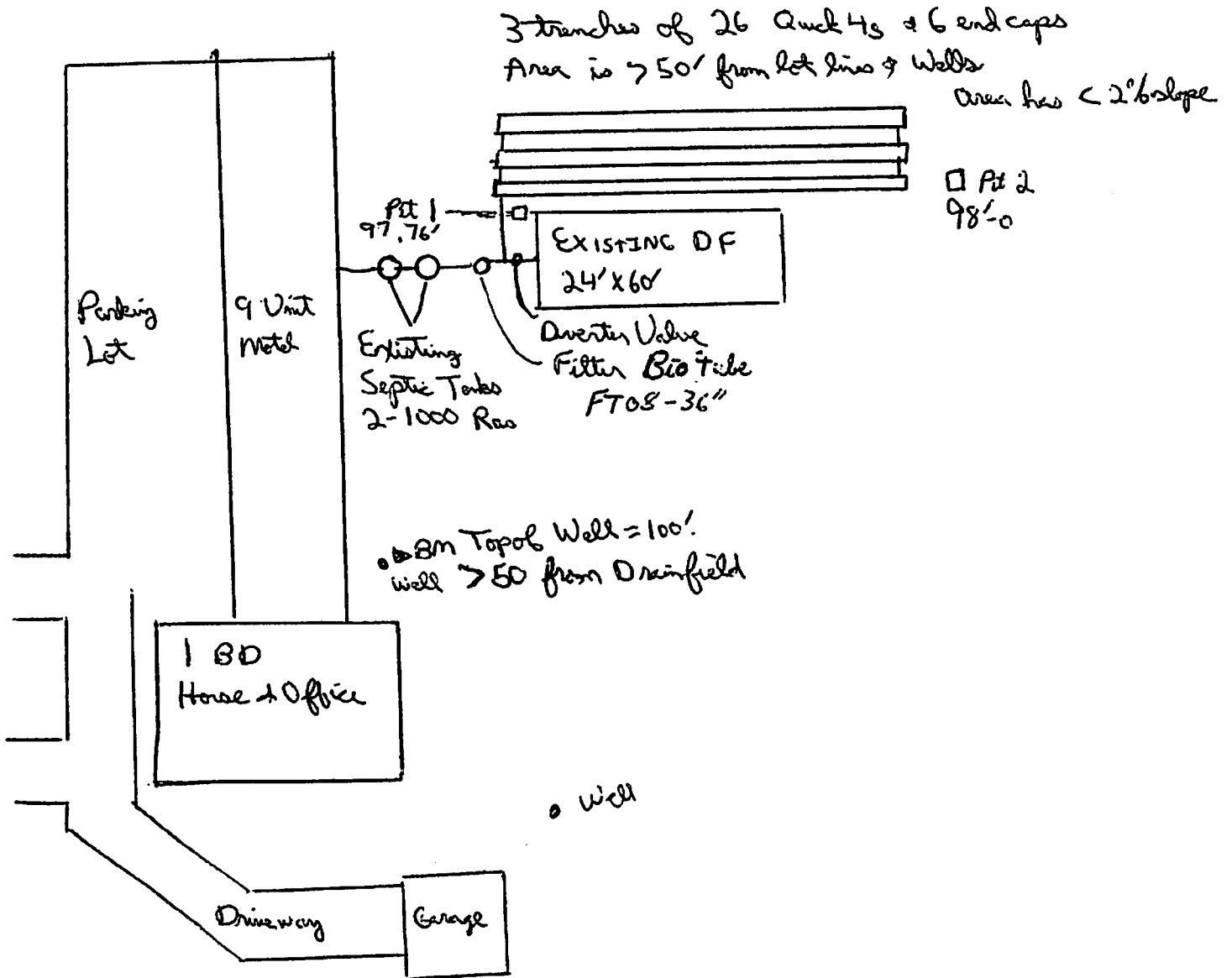
**License #:** 230236

**Phone:** 798 3885

**Date:** 10/9/08

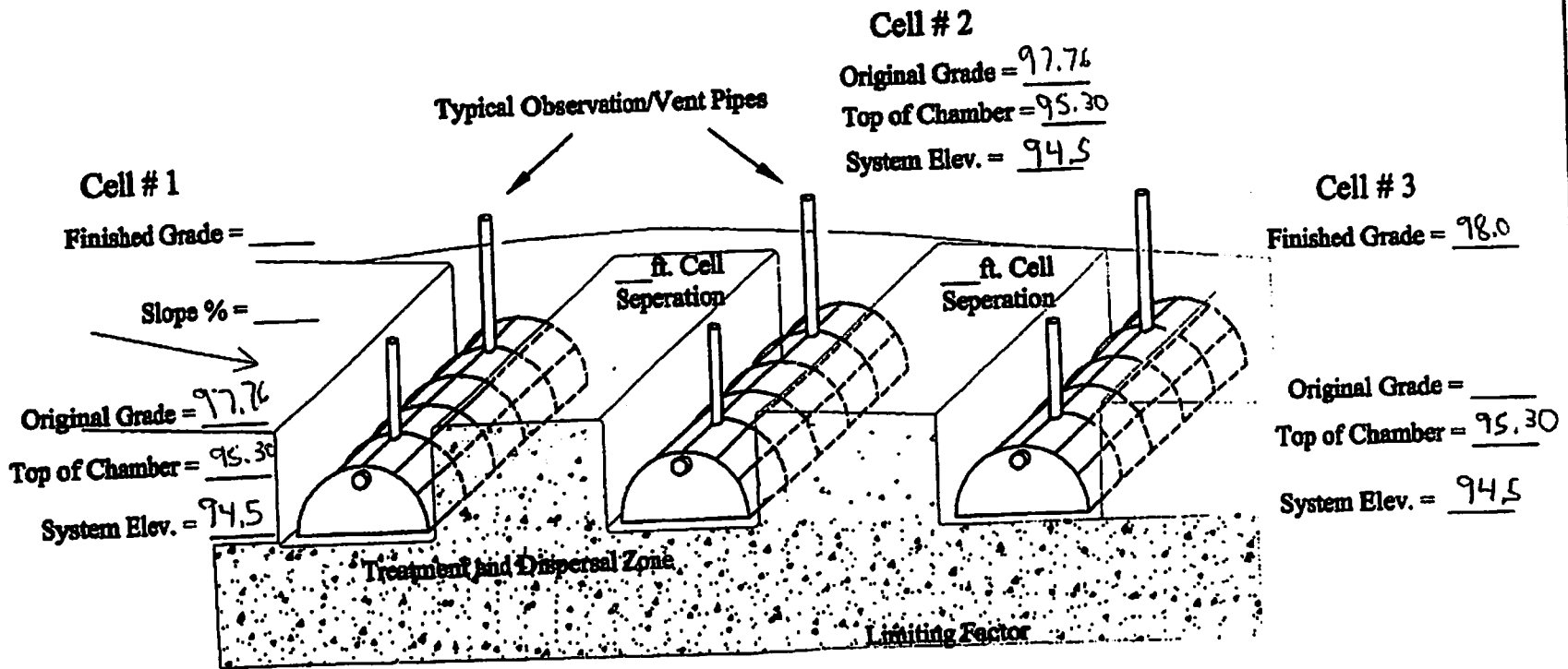
Northwoods Motel  
9854 N State Hwy 27  
Pin 010-941-33-4205

Scale 1" = 40'    N  
                          ↑





## Cross Section of a Three Cell Inground Component Using Leaching Chambers



Observation/Vent pipes to be constructed and capped with approved materials for the particular use.

Rows of 26 each 4 + 6 end caps total of 78 Chambers  
 9 room Mats = 9 x 65 gal = 585 Gal  
 1 Bedroom Office = 100 Gal  
 1 floor Drain = 25 Gal

Capacity = 25 = 710 GPD

# DIVERTER AND BACKWATER VALVES

## Diverter Valve

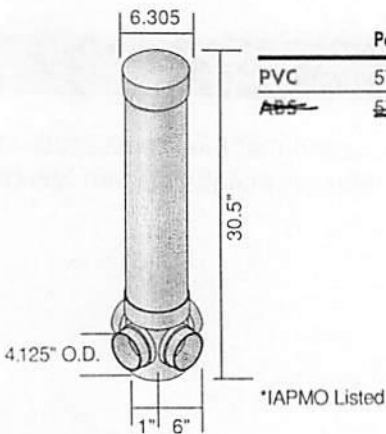
Here's the simplest, strongest, and most economical diverter valve ever invented for septic tank leach fields. It is made of tough molded plastic that will not shatter, bend, rust or corrode. It is lighter in weight, easier to handle and less expensive to ship.

### Functional

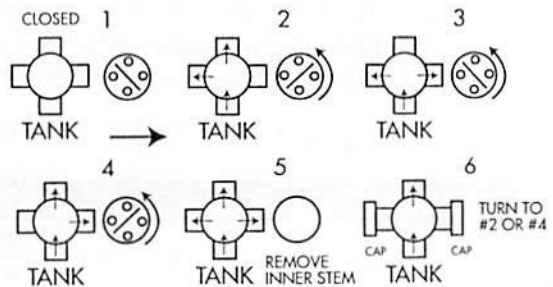
The diverter valve stem flow may be controlled to individual or multiple fields (up to three) in any combination. With a three-way valve stem, flow may be diverted to any two outlets. To allow flow through all outlets, the valve stem may be removed from the assembly.

### Easy To Install

Connect 4" plastic sewer and drain pipe to inlets and outlets on the four way distribution box. (Unwanted outlets may be sealed by installing caps). The Diverter shield which houses the diverter stem may be cut to desired length.



Part No.	Description	Color	Pkg. Qty.	Wt. Ea. (lbs.)	Product Class
PVC 575P	4" PVC Diverter Valve	White	4	9.50	35PV
<del>ABS 575</del>	<del>4" ABS Diverter Valve</del>	Black	4	7.50	35AB



## Gravity Backwater Valve

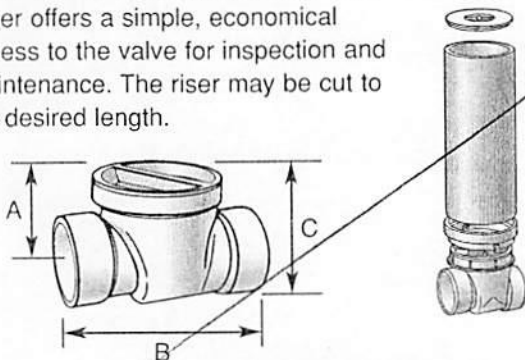
The NDS gravity flow Backwater Valve is designed to protect low areas or basements from the backflow of waste from street sewers. It is available in 2", 3", 4" and 6" sizes PVC material. It is a cost effective and a chemically resistant alternative to cast iron valves.

### Backwater Valve

The quick action flapper allows unrestricted uni-directional flow. Elastomeric gasket in the flapper ensures a watertight seal. Flapper can be easily removed and replaced if required.

Threaded access cap is designed for hand tightening. Access cap neoprene gasket provides a positive seal. Valve hub outlets fit 2", 3", 4", or 6" DWV pipe and may be adapted to 2", 3", 4", or 6" sewer and drain pipe with NDS DWV to Sewer & Drain Adapters.

Lightweight, easy to install. Horizontal installation required, with arrows on top of the valve hub pointing in the direction of the flow of water. Access riser with cover offers a simple, economical access to the valve for inspection and maintenance. The riser may be cut to the desired length.



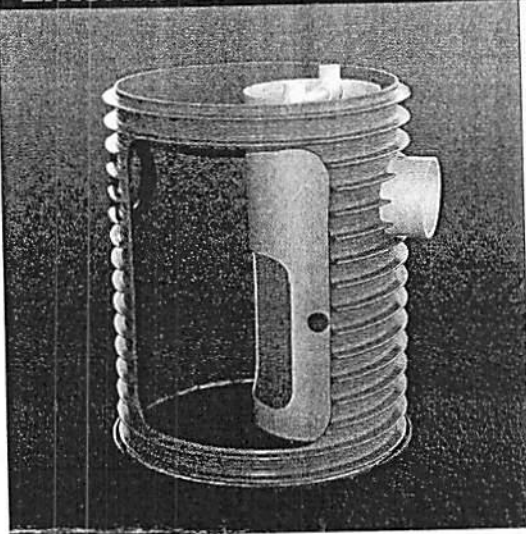
Item Number	A	B	C	Riser Height	Riser Dia.
275P, 275	2.18	5.03	3.53	16	4
275PR	2.18	5.03	3.53	16	4
375P, 375	3.51	7.56	6.10	16	6
375PR, 375R	3.51	7.56	6.10	16	6
475P, 475	4.47	11.18	7.18	16	8
475PR, 475R	4.47	11.18	7.18	16	8
675P, 675	5.50	15.25	9.90	16	10



Approvals applicable to valve only.

Note: All dimensions are nominal. All weights are for shipping purposes only. Availability is subject to change.

## External Effluent Filter Basins



Adding an effluent filter to an existing septic tank can improve a system's performance. If you can't use a Biotube filter in the tank because of small access openings or unusable outlet tees, Orenco's External Effluent Filter Basin can solve the problem. It consists of an 18-in. diameter section of ribbed PVC pipe with a fiberglass base and an 8-in. diameter Biotube effluent filter. You will need a grade ring insert (supplied), a riser (ordered separately), and a fiberglass lid (ordered separately) to bring the unit up to finished grade.

### STANDARD MODELS

FTB1824-0812	18-in. diameter, 8-in. diameter Biotube filter
--------------	--

## Selecting a Biotube® Effluent Filter

This chart shows the recommended Biotube filter, based on flow rate. It is assumed that the filter is installed in a watertight septic tank that provides at least three days' hydraulic retention time, so that the effluent has had primary treatment in the tank, before flowing through the filter.

See Orenco document NDA-FT-FT-1 for more information.

Design flow rate* (gpd)	Recommended filter
600	FTJX0418
900	FT04-28
1200	FT04-36
1500	FT0822-14B
3500	FT08-36
7500	FT12-36

\* At these design flow rates, cleaning intervals can be expected to be 2 to 3 years.

For actual flow rates from residential septic tanks, cleaning intervals typically exceed 5 years or more.

For detailed sizing criteria, contact Orenco.

5L8E-86C

# POWTS OWNER'S MANUAL & MANAGEMENT PLAN

## FILE INFORMATION

Owner: <i>Denis &amp; Mary Wallace</i>
Permit #:

## DESIGN PARAMETERS

Number of Bedrooms:	<i>1 Bedroom Home</i>	<input type="checkbox"/> NA
Number of Public Facility Units:	<i>9 Motel Rooms + 1 TR</i>	<input type="checkbox"/> NA
Estimated (average) Flow:	<i>710</i>	(gal/day)
Design (peak) Flow = (estimated x 1.5):	<i>1065</i>	(gal/day)
In Situ Soil Application Rate:	<i>.07</i>	(gal/day/ft <sup>2</sup> )
Standard (Domestic) Influent/Effluent	Monthly average	
Fats, Oil & Grease (FOG)	≤30 mg/L	<input checked="" type="checkbox"/> NA
Biochemical Oxygen Demand (BOD <sub>5</sub> )	≤220 mg/L	<input checked="" type="checkbox"/> NA
Total Suspended Solids (TSS)	≤150 mg/L	<input checked="" type="checkbox"/> NA
High Strength Influent/Effluent	Monthly average	
(FOG)	>30 mg/L	<input checked="" type="checkbox"/> NA
(BOD <sub>5</sub> )	>220 mg/L	<input checked="" type="checkbox"/> NA
(TSS)	>150 mg/L	<input checked="" type="checkbox"/> NA
Pretreated Effluent	Monthly average	
(BOD <sub>5</sub> )	≤30 mg/L	<input checked="" type="checkbox"/> NA
(TSS)	≤30 mg/L	<input checked="" type="checkbox"/> NA
Fecal Coliform (geometric mean)	≤10 <sup>6</sup>	<input checked="" type="checkbox"/> NA
Maximum Effluent Particle Size	<i>1/8</i> in dia.	<input type="checkbox"/> NA
Other:		<input type="checkbox"/> NA

## SYSTEM SPECIFICATIONS

Tank Manufacturer: <i>Peterson</i>	<input type="checkbox"/> NA
<input checked="" type="checkbox"/> Septic <input type="checkbox"/> Dose <input type="checkbox"/> Holding Volume: <i>2000</i>	(gal)
Tank Manufacturer:	<input type="checkbox"/> NA
<input type="checkbox"/> Septic <input type="checkbox"/> Dose <input type="checkbox"/> Holding Volume:	(gal)
Vertical Distance Tank Bottom(s) to Service Pad:	(ft)
Horizontal Distance Tank(s) to Service Pad:	(ft)
Provide specific servicing mechanics if vertical is >15 feet or if horizontal is >150 feet.	
Effluent Filter Manufacturer: <i>Polylock</i>	<input type="checkbox"/> NA
Effluent Filter Model: <i>PL525</i>	
Pump Manufacturer:	<input checked="" type="checkbox"/> NA
Pump Model:	
Pretreatment Unit	
Manufacturer:	<input checked="" type="checkbox"/> NA
<input type="checkbox"/> Mechanical Aeration	<input type="checkbox"/> Peat Filter
<input type="checkbox"/> Disinfection	<input type="checkbox"/> Wetland
<input type="checkbox"/> Sand/Gravel Filter	<input type="checkbox"/> Other:
Soil Absorption System	
<input checked="" type="checkbox"/> In-Ground (gravity)	<input type="checkbox"/> In-Ground (pressure) <input type="checkbox"/> NA
<input type="checkbox"/> At-Grade	<input type="checkbox"/> Mound
<input type="checkbox"/> Drip-Line	<input type="checkbox"/> Other:
Other:	<input type="checkbox"/> NA

## MAINTENANCE SCHEDULE

Service Event	Service Frequency
Pump out contents of tank(s)	<input type="checkbox"/> When combined sludge and scum equals one-third (1/3) of tank volume <input type="checkbox"/> When the high water alarm is activated
Inspect condition of tank(s)	At least once every: <i>2</i> <input type="checkbox"/> month(s) <input checked="" type="checkbox"/> year(s) (Maximum 3 years) <input type="checkbox"/> NA
Inspect dispersal cell(s)	At least once every: <i>3</i> <input type="checkbox"/> month(s) <input checked="" type="checkbox"/> year(s) (Maximum 3 years) <input type="checkbox"/> NA
Clean effluent filter	At least once every: <i>2</i> <input type="checkbox"/> month(s) <input checked="" type="checkbox"/> year(s) <input type="checkbox"/> NA
Inspect pump, pump controls & alarm	At least once every: <i>-</i> <input type="checkbox"/> month(s) <input type="checkbox"/> year(s) <input type="checkbox"/> NA
Flush laterals and pressure test	At least once every: <i>-</i> <input type="checkbox"/> month(s) <input type="checkbox"/> year(s) <input type="checkbox"/> NA
Other:	At least once every: <input type="checkbox"/> month(s) <input type="checkbox"/> year(s) <input type="checkbox"/> NA
Other:	<input type="checkbox"/> NA

## MAINTENANCE INSTRUCTIONS

Inspections of tanks and dispersal cells shall be made by an individual carrying one of the following licenses or certifications: Master Plumber, Master Plumber Restricted Sewer, POWTS Inspector, POWTS Maintainer, Septage Servicing Operator (pumper). Tank inspections must include a visual inspection of the tank(s) to identify any missing or broken hardware, identify any cracks or leaks, measure the volume of combined sludge and scum and a check for any back up or ponding of effluent on the ground surface. The dispersal cell(s) shall be visually inspected to check the effluent levels in the observation pipes and to check for any ponding of effluent on the ground surface. The ponding of effluent on the ground surface may indicate a failing condition and requires the immediate notification of the local regulatory authority.

When the combined accumulation of sludge and scum in any treatment tank equals one-third (1/3) or more of the tank volume, the entire contents of the tank shall be removed by a Septage Servicing Operator and disposed of in accordance with chapter NR 113, Wisconsin Administrative Code.

All other services, including but not limited to the servicing of effluent filters, mechanical or pressurized components, pretreatment units, and any servicing at intervals of ≤12 months, shall be performed by a certified POWTS Maintainer.

A service report shall be provided to the local regulatory authority within 30 days of completion of any service event.

Change diverter valve to old system after ponding is gone & every three years after that. Owner will change diverter valve himself per Spec.

**START UP AND OPERATION**

For new construction, prior to use of the POWTS check treatment tank(s) for the presence of painting products, solvents or other chemicals or sediment that may impede the treatment process and/or damage the soil dispersal cell(s). If high concentrations are detected have the contents of the tank(s) removed by a seplage servicing operator prior to use.

System start up shall not occur when soil conditions are frozen at the infiltrative surface.

During extended power outages pump tanks may fill above normal highwater levels. When power is restored the excess wastewater will be discharged to the dispersal cell(s) in one large dose and may overload them resulting in the backup or surface discharge of effluent. To avoid this situation have the contents of the pump tank removed by a Septage Servicing Operator prior to restoring power to the effluent pump or contact a Plumber or POWTS Maintainer to assist in manually operating the pump controls to restore normal levels within the pump tank.

Do not drive or park vehicles over tanks and dispersal cells. Do not drive or park over, or otherwise disturb or compact, the area within 15 feet down slope of any mound or at-grade soil absorption area.

Reduction or elimination of the following from the wastewater stream may improve the performance and prolong the life of the POWTS: antibiotics; baby wipes; cigarette butts; condoms; cotton swabs; degreasers; dental floss; diapers; disinfectants; fat; foundation drain (sump pump) discharge; fruit and vegetable peelings; gasoline; grease; herbicides; meat scraps; medications; oil; painting products; pesticides; sanitary napkins; tampons; and water softener brine.

**ABANDONMENT**

When the POWTS fails and/or is permanently taken out of service the following steps shall be taken to insure that the system is properly and safely abandoned in compliance with chapter Comm 83.33, Wisconsin Administrative Code:

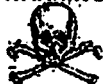
- All piping to tanks, pits and other soil absorption systems shall be disconnected and the abandoned pipe openings sealed.
- The contents of all tanks and pits shall be removed and properly disposed of by a Septage Servicing Operator.
- After pumping, all tanks and pits shall be excavated and removed or their covers removed and the void space filled with soil, gravel or another inert solid material.

**CONTINGENCY PLAN**

If the POWTS fails and cannot be repaired the following measures have been, or must be taken, to provide a code compliant replacement system:

- A suitable replacement area has been evaluated and may be utilized for the location of a replacement soil absorption system. The replacement area should be protected from disturbance and compaction and should not be infringed upon by required setbacks from existing and proposed structure, lot lines and wells. Failure to protect the replacement area will result in the need for a new soil and site evaluation to establish a suitable replacement area. Replacement systems must comply with the rules in effect at the time of their permit issuance.
- A suitable replacement area is not available due to setback and/or soil limitations. If the soil absorption system cannot be rehabilitated and barring advances in POWTS technology, a holding tank may be installed as a last resort.
- The site has not been evaluated to identify a suitable replacement area. Upon failure of the POWTS a soil and site evaluation must be performed to locate a suitable replacement area. If no replacement area is available a holding tank may be installed as a last resort to replace the failed POWTS.
- Mound and at-grade soil absorption systems may be reconstructed in place following removal of the biomat at the infiltrative surface. Reconstructions of such systems must comply with the rules in effect at that time.

**WARNING**



**TREATMENT TANKS AND HOLDING TANKS MAY CONTAIN POISONOUS GASSES AND LACK SUFFICIENT OXYGEN TO SUPPORT LIFE. NEVER ENTER A TREATMENT TANK OR HOLDING TANK UNDER ANY CIRCUMSTANCE. DEATH MAY RESULT. ESCAPE OR RESCUE FROM THE INTERIOR OF A TANK IS VERY DIFFICULT.**

**ADDITIONAL INSTRUCTIONS:**

**POWTS INSTALLER**

Name	RAY Uisocky
Phone	715 798-3885

**POWTS MAINTAINER**

Name	Scotts Pumping
Phone	634 7279

**SEPTAGE SERVICING OPERATOR (PUMPER)**

Name	Scotts Pumping
Phone	634 7279

**LOCAL REGULATORY AUTHORITY**

Name	Sauger Co
Phone	634 7279

**POWTS  
INSPECTION REPORT  
(ATTACH TO PERMIT)**

County **Sawyer**

Sanitary Permit No:  
**08-302**

State Plan Transaction ID#:  
**1597982**

Parcel Tax No:  
**010-941-33-4205**

**GENERAL INFORMATION**

"Northwoods Motel"

Personal information you provide may be used for secondary purposes [ Privacy Law, s. 15.04 (1)(m) ]

Permit Holder's Name: **Dennis, Mary Wallace**

City  Village  Town of: **Hayward**

BM Description: **Top of Ex. Well**

Insp BM Elev: **100**

**TANK INFORMATION**

TYPE	MANUFACTURER	CAPACITY
Septic	<b>2 Ex. Ras 1000s.T</b>	<b>2,000</b>
Dosing		
Aeration		
Holding		

**ELEVATION DATA**

STATION	BS	HI	FS	ELEV
Benchmark	<b>2.77</b>	<b>102.77</b>		<b>100'</b>
Bldg. Sewer				
St / Ht Inlet				
St / Ht Outlet	<b>Ex. 2<sup>ND</sup>S.T</b>		<b>6.8</b>	<b>95.97</b>
Dt Inlet				
Dt Bottom				
Installation Contour				
Header / Man.			<b>7.2</b>	<b>95.57</b>
Dist. Pipe				
Infiltrative Surface			<b>8.27</b>	<b>94.5</b>
Final Grade				
<b>Filter basket in</b>			<b>6.85</b>	<b>95.92</b>
<b>" " out</b>			<b>6.91</b>	<b>95.86</b>
<b>diverter in</b>			<b>7.0</b>	<b>95.77</b>

**TANK SETBACK INFORMATION**

TANK TO	P/L	WELL	BLDG	VENT TO AIR INTAKE	ROAD
Septic <b>Ex</b>	<b>+50</b>	<b>+50'</b>	<b>+17'</b>	<b>+17'</b>	<b>NA</b>
Dosing					<b>NA</b>
Aeration					<b>NA</b>
Holding					

**PUMP / SIPHON INFORMATION**

Manufacturer	Demand				
Model Number	GPM				
TDH	Lift	Friction Loss	System Head	TDH	Ft
<b>Forcemain</b>	<b>L</b>		<b>Dia</b>	<b>Dist. To Well</b>	

**DISPERSAL CELL INFORMATION**

DIMENSIONS	W	L	No of Cells	
	<b>3'</b>	<b>106'</b>	<b>3</b>	
SETBACK INFORMATION	P/L	Bldg	Well	OHHM of Lake or Stream
CELL TO	<b>+50'</b>	<b>+30</b>	<b>+60</b>	<b>n.a.</b>

Type of System	Distribution Media	Manufacturer:
<input checked="" type="checkbox"/> Conv	<input type="checkbox"/> Aggregate	<b>inf:1</b>
<input type="checkbox"/> IGP	<input checked="" type="checkbox"/> Chamber	Model Number:
<input type="checkbox"/> AG	<input type="checkbox"/> EZFlow	<b>Q4</b>
<input type="checkbox"/> Mound	<input type="checkbox"/> Other	

**DISTRIBUTION SYSTEM**

Header / Manifold Length	Dia	Distribution Pipe(s) Length	Dia	Spac	*Hole Size	*Hole Spacing	Observation Pipes
							<input type="checkbox"/> Yes <input type="checkbox"/> No

**SOIL COVER**

Depth Over Cell Center	Depth Over Cell Edges	Depth of Topsoil	Seeded / Sodded	Mulched
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

COMMENTS: (Include code discrepancies, persons present, etc.)

\* Plbr using Existing 2ea Rasmussen 1000 gal Round Septic Tanks  
 " installed filter crack after 2<sup>ND</sup> S.T  
 " " diverter valve to use existing old bed every ± 2,3 yrs.

Plan revision required?  Yes  No

**11 6 08**

**MW Mahi**

**2 2 4 9 0 1**

Use other side for additional information

Date

POWTS Inspector's Signature

Cert No

11-6-08

← TO Hayward ± 2 1/2 mi

State Hwy 27

