PRIVATE SEWAGE SYSTEM INSPECTION REPORT for **Dunn** County

Name	Ron Welsch			
Address	1014 N Shore Dr.			
City	Menomonie			
State & Zip	WI	54751		

PLUMBER:	CST:	
Todd Sinz	Will Heidt	

GENERAL INFORMATION

CST BM Elev.: 100	Insp. BM Elev.: 100
Nail in Post	

TANK INFORMATION

TYPE	MANUFACTURER	CAPACITY
Septic 1 & 2	Both Existing	
Septic 3	Skaw	1000
Dosing	Existing	

TANK SETBACK INFORMATION

TYPE	P/L	WELL	BLDG	VENT TO AIR INTAKE
Septic 3	>100'	118'	22'	
Dosing				

PUMP/SIPHON INFORMATION

Manuf/N	Model	# Zoel	er 140	
Lift			System Hea	d TDH Ft.
14.26	:	2.47	5.05	21.8
Forcer	Forcemain		Dia	Dist. to Well
		~50'	2"	>100'

Property Address/City	N6164 370th St.		
Town of	Menomonie		
Legal	SE-SE 17 28-13		
Subdivision			
CSM #	Lot. 2 CSM #1117		
Sanitary permit #	651268		
State Plan ID #	PWTS-082301755-C		
Parcel tax #	1701622813174400005		
Computer #			

ELEVATION DATA

STATION	ELEVATION	ELEVATION
Benchmark		100
Bldg. Sewer		
St 3 Inlet	New	99.25
St/Ht Outlet		99.05
Pump Pad		90.90
Manifold T Between M	lounds	98.14
Header/Manifold	New	105.16
Lateral	New	105.11
System Elevation	New	104.6
Lateral		
System Elevation		· ·
Grade/Contour	New	103.96
Top of Vent Cover on	Pump Tank	100.30
Well		
Manifold	Existing	99.91
Lateral	Existing	99.96
System Elevation	Existing	99.45

Recore existing mound and adding 2nd mound and pump tank to serve 5 bedroom house and business with 2 employees *Easement filed to allow Mounds partially on southern parcel.

SOIL ABSORPTION SYSTEM

Dispersal Cell Information	Width 6' & 5'	Length 68' & 80'	No. of Ce	ells 2	
Setback	Type of System	P/L	Bldg	Well	Lake/Stream
Information	Mound (Rock)	*		>150'	

DISTRIBUTION SYSTEM

-	Header/Manifo Length 3'	old Dia. 1.5"	Distribution pipe(s) Length 66' Dia. 1.5" Spacing 3'		X Hole Size 5/32"	X Hole Spacing 3'	
	Header/Manifold		Distribution pipe	e(s)		X Hole Size	X Hole Spacing
1	Length 2.5'	Dia. 1.5"	Length 76.8'	Dia. 1.5"	Spacing 2.5'	5/32"	4.8'

WI FUND:Yes	>
New House/Double Wide	
New Mobile Home	
New Other	
Replace/Repair/Reconnect	X

-New Mound flagged by Soil Tester. Contour didn't match design elevation. Used flagged contour and shifted system elevation and lateral elevation accordingly.

COMMENTS:

-Existing Mound contour didn't match paperwork. Plumber used pump pad on old inspection report and bottom of system to install mound with 1ft of sand.

-Existing Simtech Filter. Adding Lifetime filter to new septie tank. Existing forcemain buried. 11/13/2023-New Mound

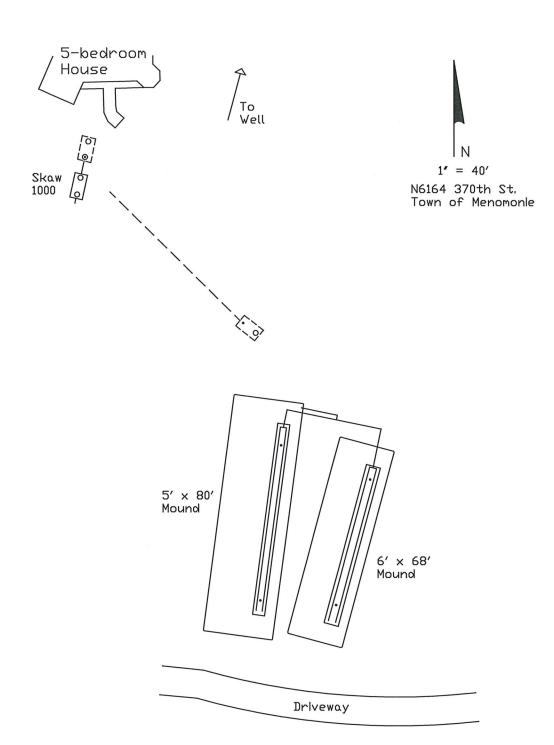
11/14/2023-Existing Mound & Tank
Date

Maybe

No

Inspector's Signature

1360690 Cert. No.



DUNN COUNTY

Parcel#: 1701622813174400005

Alternate#: 016111308000

STATE * SANITARY PERMIT

OWNER Ron Welsch 1014 N Shore Dr. Menomonie, WI 54751 Replacement Mound - N6164 370th St.

LICENSE # 139462 Todd Sinz PLUMBER

LOCATED SE-SE Menomonie TOWN OF

13 N - R 28 SECTION

AND/OR LOT

CSM #1117

SUBDIVISION/CSM

(b) The approval of the sanitary permit is based on regulations on force on the date of issue.
(c) The sanitary permit is valid 2 years from original date of issuance and may be renewed for similar periods thereafter. Application for renewal shall be made through the county and shall comply with regulations in effect at the time.

The purpose of the sanitary permit is to allow installation of the

(a)

CHAPTER 145.135 WISCONSIN STATUTES

651268

No.

Changed regulations will not impair the validity of a sanitary permit until the time of renewal.

(p)

(e)

>

Renewal of the sanitary permit will be based on regulations in force at the time renewal is sought. Changed regulations may impede renewal.

The sanitary permit is transferable. A sanitary permit transfer shall be obtained from the county authority.

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BLOCK

If you wish to renew the permit, or transfer ownership of the permit please contact the county authority.

DATE 11/10/2023 AUTHORIZED ISSUING OFFICER

(5-Bedroom House & 2-Employee Office)

THIS PERMIT EXPIRES

UNLESS RENEWED PRIOR TO THAT DATE 11/09/2025

(TWO YEARS FROM THE ORIGINAL DATE OF ISSUANCE)

PLACE VISIBLE FROM THE ROAD FRONTING THE LOT DURING CONSTRUCTION

SBD-6499(R. 9/16)

STANDARTMEN OF STANDARD	Industry 4822	ry Services Division Madison Yards Way	County Dunn
RECEIVED NOV 09	Mac	dison, WI 53705 P.O. Box 7162	Sanitary Permit Number (to be filled in by Co.)
RECEIVE RECEIVE	Madis	son, WI 53707–7162	651268
Sanitary P	State Transaction Number		
In accordance with SPS 383.21(2), Wis. Adm. Co	de, submission of this form	to the appropriate governmental unit	PWTS-082301755-C
is required prior to obtaining a sanitary permit. N the Department of Safety and Professional Service	es. Personal information you	state-owned POW IS are submitted to u provide may be used for secondary	Project Address (if different than mailing address) N6164 370th St
purposes in accordance with the Privacy Law, s. I. Application Information – Please Print			1401040704101
Property Owner's Name	2024	Edition of the second and report	Parcel #
Ron Welsch Property Owner's Mailing Address			1701622813174400005 Property Location
1014 North Shore Dr			Govt. Lot
City, State	Zip Code	Phone Number	1
Menomonie	WI	54751	SE 14, SE 14, Section 17
II. Type of Building (check all that apply)	the state of the s	Lot#	T28 N R 13 E or W
or 2 Family Dwelling – Number of Bedroom	/ "	Block #	-
Public/Commercial – Describe Use	VI UPPIC	Dioek "	City of
State Owned – Describe Use		CSM Number	Village of
		1117	Town of Menomonie
III. Type of POWTS Permit: (Check eith	er "New" or "Replacem		e A. Check one box on line B. Complete line C if
applicable.)	- I		
Replacement S	stem Other Modific	cation to Existing System (explain)	Additional Pretreatment Unit (explain)
B. Holding Tank In-Ground (conventional)	At-Grade	Mound	Individual Site Design Other Type (explain)
C. Renewal Before Revision	Change of Plu	umber Transfer to New Owner	List Previous Permit Number and Date Issued
Expiration Expiration			
IV. Dispersal/Treatment Area and Tank Design Flow (gpd) Design Soil Application			ea Proposed (sf) System Elevation
189 4 7			07.6 103.62/100.62
Tank Information Capacit			Trop
Tank information	Existing Tanks		Prefab Concrete Site Con- structed Steel Fiber Glass Plastic
Septic or Holding Tank 1000	2000 300	20 30 16 Store 7	
Dosing Chamber	1000 10	on IV HUFFER TT	
V. Responsibility Statement- I, the unders	gned, assume responsibilit	ty for installation of the POWTS sho	wn on the attached plans.
Plumber's Name (Print)	Plumber's Signature		P/MPRS Number Business Phone Number
Todd Sinz Plumber's Address (Street, City, State, Zip Code)	pu		39462 715-235-2644
E5609 708th Ave Menomo	nie WI 54751		,
VI. County/Department Use Only			
Approved	Permit Fee \$ 54000	Date Issued Issuing Age	ent Signature
☐ Owner Given Reason for De Conditions of Approval/Reasons for Disapp	mai	" ((VIZVZ)	
			216 3-12 1 2 2 2 1 2
Mound components	nust be at lee	st soft from all w	ells, All traves schell
be located at least	25 ft from any	wells,	
			i

Wisconsin Department of Safety and Professional Services Division of Industry Services 4822 Madison Yards Way PO Box 7302 Madison, WI 53707



Phone: 608-266-2112 Web: http://dsps.wi.gov Email: dsps@wisconsin.gov

Tony Evers, Governor Dan Hereth, Secretary

August 21, 2023

CUST ID NO.: 1469067 DALE A SCHLIEVE 312 CONRO ST RHINELANDER, WI 54501

CONDITIONAL APPROVAL

PLAN APPROVAL EXPIRES: 08/21/2025.

MUNICIPALITY: TOWN OF MENOMONIE DUNN COUNTY

SITE:

RON WELSCH N6160 370TH ST MENOMONIE, WI 54751 SE1/4 SE1/4 S17 T2813W

FOR:

Design Wastewater Flow Value: 789 Bedrooms: & bed. 2 employees. Limiting Factor(s): 36" (New Cell) Maintenance Required: Effluent Filter Identification Numbers
Plan Review No.: PWTS-082301755-C
Application No.: DIS-082334711

Site ID No.: SIT-119613

Please refer to all identification numbers in each correspondence with the Department.

Conditionally

APPROVED

DEPT. OF SAFETY AND PROFESSIONAL SERVICES
DIVISION OF INDUSTRY SERVICES

Travis Wagner

SEE CORRESPONDENCE

Mound Component Manual - Version 2.1 (May 2022-2027) Pressure Distribution Component Manual - Version 2.1 (May 2022-2027)

SITE REQUIREMENTS

• A full-size 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. A Department electronic stamp and signature shall be on the plans which are used at the job site for construction.

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

- Domestic wastewater only for proposed 2 employees working from barn.
- It is recommended to fence off dispersal area prior and during construction to avoid disturbance, compaction and use of the site.
- With new construction, it is recommended not to activate the pump in the dose tank until the tanks are pumped prior to homeowner occupancy.
- Wastewater generated from contractors cleaning of equipment and tools and/or left-over construction products shall not be discharged into the drains discharging to the private onsite wastewater treatment system (POWTS). Waste generated shall be properly disposed of on-site or off site.
- Any tall grasses, leaves and shrubs shall be cut short and removed prior to tilling the surface for installation to prevent matting
 under the dispersal area.
- Prior to construction of the dispersal area, check the moisture content of the soil to a depth of 8 inches. Smearing and compacting of wet soil will result in reducing the infiltration capacity of the soil. Proper soil moisture content can be determined by rolling a soil sample between the hands. If it rolls into a 1/4- inch wire, the site is too wet to prepare. If it crumbles, site preparation can proceed. If the site is too wet to prepare, do not proceed until it dries.
- Electrical connections shall comply with SPS 316.300 and NEC 300

- All piping shall conform to SPS Table 384.30-3 and SPS Table 384.30-5
- Insulate building sewers beyond 30 feet per SPS 382.30 (11)(c)
- Well shall be located 50 feet from drainfield and 25 feet from treatment or pump tanks.

The plans do not have detailed instructions for the replacement of the existing failing mound system dispersal component. The following must be completed in addition to any comments made from the County inspector:

- a. Remove excess/overgrown vegetation from mound, mow and remove clippings. Remove and stockpile topsoil from the mound system. Remove cap dirt and stockpile.
- b. Pump out any standing wastewater through observation pipes.
- c. Permit dispersal area to dry out.
- d. Pump out septic and dose tanks.
- e. Remove aggregate from absorption area(s) and dispose of in approved manner. (This material cannot be re-used.)
- f. Remove distribution pipes and observation pipes. Dispose of properly.
- g. Remove end cap markers if present and dispose of properly.
- h. Remove clogged sand plus an additional 3 inches of clean sand and dispose of properly. (Sand with observable particulate matter cannot be re-used.)
- i. Sample remaining sand at several locations and have it analyzed for particle size. If the sand does not meet ASTM Specification C-33 for fine aggregate, it must be removed down to the natural soil.
- j. Install replacement mound system using procedure outlined in the approved mound system component manual.

OWNER RESPONSIBILITIES

- The current owner, and each subsequent owner, shall receive a copy of this letter including instructions relating to proper use and maintenance of the system. Owners shall receive a copy of the appropriate operation and maintenance manual and/or owner's manual for the POWTS described in this approval and Wis. Admin. Code § SPS 383.54(1).
- 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.

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.145.06, stats.

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 Industry Services 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. The Division does not take responsibility for the design or construction of the reviewed items.

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

Sincerely,

Travis Wagner

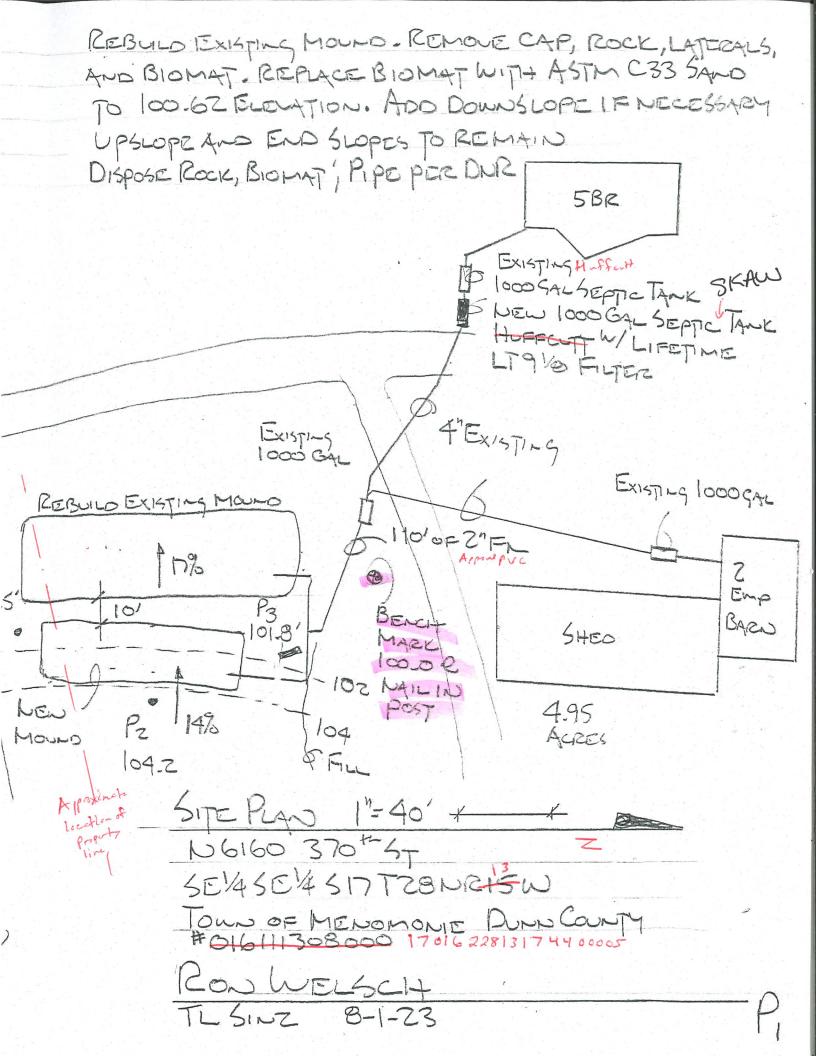
Division of Industry Services Phone: 608-598-0715

Travis Wagner

Email: travis.wagner@wisconsin.gov

Fee Required: \$250.00

Fee Received: \$250.00 Balance Due: \$0.00 Refund Expected: \$0.00



REBUILD EXISTING LOWER MOUND DESIGN

395 DWF 7.75 LIMITING FACTOR 17% SLOPE
CELL SIZE WIDTH(A).5.0 × LENGTH(B) 80.0 = 400 SF
UPSLOPE FILL (D) 1.0 DOWNSLOPE FILL (E) 1.9
CELL DEPTH (F) .8 CAP DEPTH (G).5 CAP DEPTH(H) 1.0
MOUNDLENGTH: END SLOPE(K) 3(1.45 +.8 + 1.0) = 9.8
LENGTH (L) 80 + (2 × 9.8) = 99.6
MOUNDLINTH: FACTORS UPSLOPE .66 DOWNSLOPE 7.04
UPSLOPE (J) 3(1.0 +.8 +.5).66 = 4.6
DOWNSLOPE(I) 3(1.9 +.8 +.5).66 = 4.6
DOWNSLOPE(I) 3(1.9 +.8 +.5).7.04 = 19.6
WIDTH (W) 4.6 +5.0 + 19.6 = 79.7
BASAL AREA 395 DWF = 4 SOILS RATE = 987.5 SF

· OBSERVATION 10' FROM CELL ENOS

X THREADED, CAPPED, TURNEDUP YACCESS (T/C)

Pz

SYNTHERE COURS 12"LATERALS YENZE"ASSPECGATE 6"BELOW, Z" ABOUZ Aprz Topsoil ABOVE ,8 103.62 ASTM C33 PLONED LAYER SANDFILL 5 SECTION READED! TPPEO ng Sweep 5 HOLE 5(T/C) 5/32 Hoves 3'0C 42 14 23 × 54:24.846PT 66 LAMOUT LTS > Puc Pressure Pipe on Botton 4.55 DYNAMIC HEAD: SYSTEM HEADX 1.3×3.5 12.52 LIFT 104.12-91.6 Friction Loss 493 x1.1 5-43 TO14 23.015 SE(5×W) (5×Z×1428×.092)+17.93 =149.3164 = 20% DWF (789 DWF x - 20) + 17.93 = 175-7362

STATHEFIC 1/2" LATERAL L'AZE" AGGREGATE 6" BELOW , Z" ABOUR PIPE Topsoil ABOUE. 100.62 1-9 ASTM C33 SALOFILL PLOWED LAYER 19-6 4-6 5-01 S DECTION HEELDED! 17% LOWER APPED ng Sweep 4.8 The LAKERN JA, 82 5 HOLE ,5(T/c) 76.8 LAMOUT LIS > PUC PRESSURE PIPE V17x,73=24,82 35 HEADTS' DELE on Bottom X 01-12 EUE = 4.55 DYLANICHEAD: SYSTEM HEADX 1.3 × 3.5 5 12.52 LIFT 104.12-91.6 = 5-43 FRICTION LOSS 493 × 1-1 FILTER TOH 23.0 FT SE(5×W) (5×2 ×142.8×-092)+17.93 = 149.3164 E 20% DWF (789 DWF x - 20) + 17.93 = 175.73 GAL

PROJECT DESCRIPTION: RON WELSCH N6160 370TH STREET SE1/4 SE1/4 S17 T28NR13W TOWN OF MENOMONIE DUNN COUNTY

THERE ARE 2 BUILDINGS WITH SEPARATE SEPTIC TANKS. A 5 BEDROOM HOUSE WITH AN EXISTING 1000 GALLON SEPTIC TANK AND WE WILL ADD A 1000 GALLON SEPTIC TANK WITH A NEW FILTER. THE OTHER BUILDING IS A BARN WITH 2 EMPLOYEES WITH AN EXISTING 1000 GALLON SEPTIC TANK.

THE 789 DWF DEMAND WAS CALCULATED FROM THE WI DSPS MOUND COMPONENT MANUAL.

THE SEPTIC TANKS GRAVITY DISCHARGE INTO AN EXISTING 1000 GALLON PUMP TANK. THE PUMP TANK WILL PUMP INTO A NEW MOUND AND A REBUILT EXISTING MOUND.

	Ron WELSCH
	5 BEOROOM 100 500
	Z ENPLOYER 13 26
	526 x 1.5=789 DWF
	789 DWF - 2 MONOS = 394.55F
	EXISTING LOWER MOUND TO BE REBUILT. REMOVE CAP,
	ROCK (5'x92'), LATERALS, AND BIOMAT
	LOWER CELL 5×80 4005 LIPPER CELL 6×68=408.
	Upper 3.5 Haya 5/32" (.54) 22 × 3.6 - 66.0"
	Zx23x_54=24.84GPM
	LOWER 35 HEAD+ 3' 5/32" (-73) 16 x4.8=76-8
	Zx17x.73=24-82GPM
	Upper 24.84 50.1%
	Lours 24.82 49.9%
	49.66
	789 DUFX,501=395.3
	789 DWF x .499 5 39,3.7
- Indiana in the second	789.0
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POWTS OWNER'S MANUAL & MANAGEMENT PLAN

FILE INFORMATION		SYSTEM SPECIFICATIONS	-
Owner: RON WELSCI+		Septic Tank Capacity 300 5 gal	□ NA
Permit# 651268		Septic Tank Manufacturer	□ NA
DESIGN PARAMETERS		Effluent Filter Manufacturer 1 PETINE / SINT	□ NA
Number of Bedrooms	5	Effluent Filter Model LT9 V8/57F100	IINA
Number of Public Facility Units	ZENP DNA	Pump Tank Capacity 1000	ΠNA
Estimated flow (average)	526 gal/day	Pump Tank Manufacturer JUFFCUTT	□ NA
Design flow (peak), (Estimated x 1.5)	789 gal/day	Pump Manufacturer ZOELLER	□ NA
Soil Application Rate	gal/day/ft²	Pump Model 40	□ NA
Standard Influent/Effluent Quality	Monthly average*	Pretreatment Unit	NA
Fats, Oil & Grease (FOG)	≤30 mg/L	☐ Sand/Gravel Filter ☐ Peat filter	, –,
Biochemical Oxygen Demand (BOD₅)	≤220 MG/L	☐ Mechanical Aeration ☐ Wetland	
Total Suspended Solids (TSS)	≤150 mg/L	Disinfection Other:	
Pretreated Effluent Quality	Monthly average	Dispersal Cell(s)	□ NA
Biochemical Oxygen Demand (BOD₅)	>30 mg/L	☐ In-Ground (gravity) ☐ In-Ground (Press	ıre)
Total Suspended Solids (TSS)	≤30 mg/L 📈 NA	☐ At-Grade ☑ Mound	
Fecal Coliform (geometric mean)	≤10 ⁴ mg/L	☐ Drip –Line ☐ Other:	
Maximum Effluent Particle Size	laximum Effluent Particle Size		□NA
Other:	□NA	Other:	□NA
*Value typical for domestic wastewater and sept	ic tank effluent.	Other:	□ NA
MAINTENANCE SCHEDULE			
Service Event		Service Frequency	
Inspect conditions of tank (s)	At least once every:	36 month (s) (Maximum 3 years)	□ NA
Pump out contents of tank(s)	When combined slud	ge and scum equals one-third (1/3) of tank volume	
Inspect dispersal cell(s)	At least once every:	36 month (s) (Maximum 3 years)	□NA
Clean effluent filter	At least once every:	3	□NA
Inspect pump, pump controls & alarm	At least once every:	13 month (s) year(s)	□NA
Flush laterals and pressure test	At least once every:	(3 ☐ year(s)	□ NA
Other:	At least once every:	month (s) year(s)	□NA
MAINTENANCE INSTRUCTIONS			

Inspections of tanks and dispersal cells shall be made by an individual carrying on of the following licenses or certifications: Master Plumber; Master Plumber Restricted Sewer; POWTS Inspector; POWTS Maintainer; Septage Servicing Operator. 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 sum 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 falling 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 with 30 days of completion of any service event.

START UP AND OPERATION

For new construction, prior to use of the POWTS check treatment tank(s) for the presence of painting products or other chemicals 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 septage 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, overloading the cell(s) and may result in the backup or surface discharge of effluent. To avoid this situation have the contents of the pump rank 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; bay 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; paining products; pesticides; sanitary napkins; tampons; and water softener brine.

ABANDONEMENT

When the POWTS fails and/or is permanently taken out of service the following steps shall be taken to insure that ht system is properly and safely abandoned in compliance with chapter SPS 383.33, Wisconsin Administrative Code:

- All piping to tanks and pits 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 materials.

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

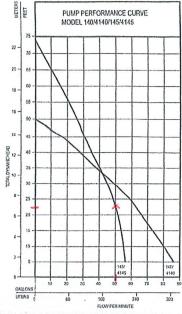
	 -,
[A suitable replacement area has been evaluated and may be utilized for the location of a replacement soil absorption system. The replacement area should be protected from disturbance and compaction and should not be infringed upon by required setbacks from existing and proposed structure, lot lines and wells. Failure to protect the replacement area will result in the need for a new soil and site evaluation to establish the suitable replacement area. Replacement systems must comply with the

	setoacks 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 the suitable replacement area, Replacement systems must comply with the rules in effect at the time.
	A suitable replacement area is not available due to setback and/or soil limitations. Barring advances in POWTS technology, a holding tank may be installed as a last resort to replace the failed POWTS.
	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.
d	Mound and al-grade soil absorption systems may be reconstructed in place following respected to the birest of the

The site has not been evaluated to identify a suitable replacement be performed to locate a suitable replacement area. If as a last resort to replace the failed POWTS.	sement area. Upon failure of the POWTS a soil and site evaluation f no replacement area is available a holding tank may be installed
< <warning>></warning>	
SEPTIC, PUMP AND OTHER TREATMENT TANKS MAY CONTAIN ENTER A SEPTIC, PUMP OR OTHER TREATMENT TANK UNDER PERSON FROM THE INTERIOR OF A TANK IS VERY DIFFICULT (ANY CIRCUMSTANCE DEATH MAY DECLUT DECCUE OF A
ADDITIONAL COMMENTS:	
""SCONS	'/ ₁ ,
DALEA	:à=
POWTS INSTALLER / SCHLIEVE	POWTS MAINTAINER
Name OPP SING RHINGIANDER	Name
	Phone
SEPTAGE SERVICING OPERATOR (PUMPER)	LOCAL REGULATOR AGENCY
Name	
	Name DUNG CO ZONING
Phone	Phone 715-231-6520
This document was drafted in compliance with chapter SPS 383.22(2)(b)(1)(d)&(f) and	383.54(1), (2) & (3), Wisconsin Administrative Code. Revised 3/29/13

TOTAL DYNAMIC HEAD FLOW PER MINUTE

MODEL		140	/4140	145/4145		
Feet	Meters	Gal.	Liters	Gal.	Liters	
5	1.5	86	326	56	212	
10	3.0	80	303	55	208	
15	4.6	73	276	53	200	
20	6.1	66	250	51	193	
25	7,6	59	223	48	182	
30	9.1	49	185	45	170	
40	12.2	28	106	35	132	
50	15.2			26	98	
60	18.3		-	16	61	



Model			- H- 3			MODEL	COMPAR	ISON			
	Seal	Mode	Volts	Ph	Amps	HP	Hz	Lbs	Kg	Simplex	Duplex
N140	Single	Non	115	1	12.0	1	60	46	21	1 or 2	3
E140	Single	Non	230	1	6.0	1	60	46	21	1 or 2	3
BN140	Single	Auto	115	1	12.0	1	60	47	21	*	
BE140	Single	Auto	230	1	6.0	1	60	47	21	×	***
E145	Single	Non	230	1	6.0	3/4	60	46	21	1 or 2	3
N145	Single	Non	115	1.	13.0	3/4	60	46	21	1 or 2	3
BN145	Single	Auto	115	1	13.0	3/4	60	48	22	•	
N4140	Double	Non	115	1	12.0	1	60	65	29	*	*
E4140	Double	Non	230	1	6.0	1	60	65	29	1 or 2	3
BN4140	Double	Auto	115	1	12.0	1	60	66	30	*	
BE4140	Double	Auto	230	1	6.0	1	60	66	30	*	
N4145	Double	Non	115	1	13.0	3/4	60	64	29	1 or 2	3
BN4145	Double	Auto	115	1	13.0	3/4	60	64	29	*	***

* Single piggyback switch included.

BN and 8E models include a 20' (6 m) piggyback variable level pump switch. Additional cord lengths are available in 15' (5 m), 25' (8 m), 35' (11 m) and 50' (15 m). 50' (15 m) cord length is for 230 V only.

SELECTION GUIDE

- 1. For automatic, use single piggyback variable level float switch or double piggyback variable level float switch. Refer to FM0477.
- See FM1228 for correct model of simplex control panel.
 See FM0712 for correct model of duplex control panel.

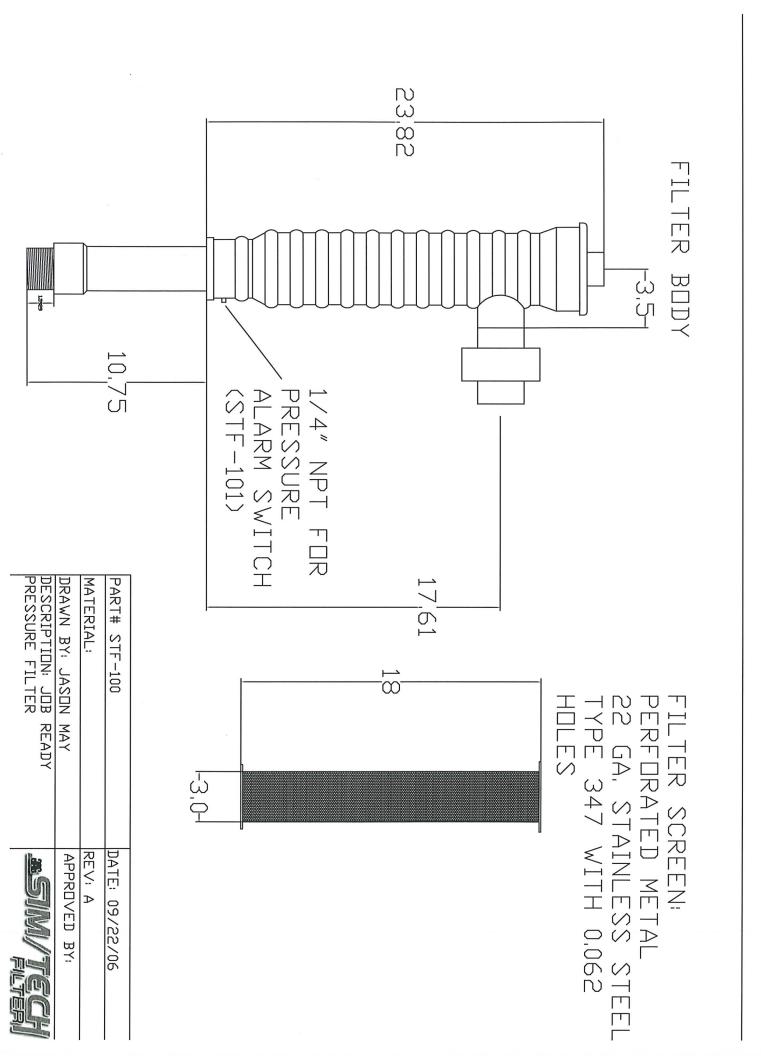
OPTIONAL PUMP STAND P/N 10-2421

- Reduces potential clogging by debris
 Replaces rocks or bricks under the pump

- Nade of durable, noncorrosive ABS
 Raises pump 2" (5 cm) off bottom of basin
 Provides the ability to raise intake by adding sections of 1-1/2" or 2" (0N40 or DN50) PVC piping
- Attaches securely to pump
 Accommodates sump, dewatering and effluent applications
 NOTE: Make sure float is free from obstruction.



A CAUTION All instullation of controls, protection devices and wiring should be done by a qualified licensed electrician. All electrical and safety codes should be followed including the most recent National Electrical Code (NEC) and the Occupational Safety and Health Act (OSHA).



Wisconsin Depart	ment of Safety	and Professio	nal Services
Division of Industr	Services		

7

RECEIVED NOV 0 9 2023

SOIL EVALUATION REPORT

WECT, 4	In accordance with SPS 385, Wis. Adm. Code
Attach complete site plan on paper not less that but not limited to: vertical and horizontal referen scale or dimensions, north arrow, and location a	1 8 1/2 x 11 inches in size. Plan must include,

County	market .
Parcel I.D.	Pann
	61622813174400005

oddio of dimensions, north arrow, and location and distance to nearest ro	ad1761622813174400005				
Please print all information.	Reviewed by Date				
Personal information you provide may be used for secondary purposes (Priva	cy Law, s. 15.04(1)(m)).				
Property Owner Ron Welsch	Property Location Govt. Lot 5 = 1/4 5 = 1/2 T R N R 1/3 = (or) W				
Property Owner's Mailing Address 1014 North Shore Dr.	Lot# 2 Block# Subd. Name or CSM#				
City State Zip Code Phone Number Menomonde W1 54751 309 - 9739	City Village Town Nearest Road Menomonie N6/60 370'S+				
New Construction Use: Residential / Number of bedrooms S Code derived design flow rate 800 GPD Replacement Public or commercial – Describe: Office – Zemplayas Parent material 10255: 002 S residing Flood Plan elevation if applicable 14 ft.					
Parent material <u>loess</u> . Over ss residin Flood Plan elevation if applicable NA fi. General comments and recommendations: Addition Area available recommend 6"saw Foll many 70 may Rock length					

available duoto Filled in Anay 0.4 load rate Boring
Pit Boring # Depth to limiting factor 58 in. Ground surface elev. 10/-5 ft.

Lindran	Davids								Soil Appli	cation Rate
Horizon	Depth In.	Dominant Color Munsell	Redox Description Qu. Az. Cont. Color	Textu		Consistence	Boundary	Roots	GP	D/Ft ²
		Widisen	Qu. Az. Cont. Color		Gr. Sz. Sh.				*Eff#1	*Eff#2
	010	164R372	NONE	51	2mgr	An Fr	65	252m		10
2	1079	1048 4/3		5	155%=	mfr	1	Zfzm		12
3	19-26	104R4/4		sil	2 F=1/2	mfc	0	751	- 1	0-1
4	2638	104R 4/4		35	2mg/1-		35	Zf	0.6	0-81
5	38-46	1040511	Czfosyn 8/2 tol	511	msok	mtr	3	25	0-0	0-8
	00 10	70112	-21/31/18171	211	165bt	mfr-			0-4	0.6
	-									
							BIG	MA		

oth to limiting factor 36 in.

	,			r* "					Soil Applie	notion Data
Horizon	Depth In.	Dominant Color Munsell	Redox Description Qu. Az. Cont. Color	Texture	Structure Gr. Sz. Sh.	Consistence	Boundary	Roots		cation Rate D/Ft²
 	0-9	1,4036							*Eff#1	*Eff#2
	9-15	10 8R 5/2	NONE	51	Zmgn	mon	05 3	Em	06	1-0
	173	104K 113		loam		mfr	85 6	PFam	0-4	0.6
3	15-20	109R 4/4		51	2856	more	85	Klm	0.6	08
4	2030	104R 4/4		50	2msbt	mf	65	25	1	
5	30-36	104R 5/4		slwgs	1 //	mr	36		0-6	6-8
1	36+	55BR	- Y	1000	1000	Mile	3,0		0.4	0.7
		3300								
	* Effluent #1	= BOD. > 30 ≤ 220	mg/L and TSS > 30 ≤ 1	50 mall	* 1770					
CST Name (Please Print)		S/gnature/	JU HIG/L	Effluent	#2 = BOD, > 30				
			J'ighaldie	- V	1/0 1/	CST	Number 7	200	_	

AddressWill Heidt Soil Testing W3503 Hemlock Road Mondovi, WI 54755 (715) 579-9584 Telephone Number 9584 SBD-8330 (R04/15)

Ron Wel

		Pit	Ground surface elever ft.			Depth to limiting factor <u>90</u> in.				
	· · · · · · · · · · · · · · · · · · ·	T			1				Soil Appli	cation Rate
Horizon	Depth In.	Dominant Color Munsell	Redox Description Qu. Az. Cont. Color	Texture	Structure	Consistence	Boundary	Roots		D/Ft ²
<u> </u>	1			 	Gr. Sz. Sh.				*Eff#1	*Eff#2
	02()	1049/2	NONE		15565	mtr	gs o	Zfzm	0.4	0-7
3	11-18	104R4/2		51	lfsbk	mfo	1850	2fzn	0-4	0.7
3	18-25	104R 4/4		31	2Fsbk	mfr	95 0 25 0	Zfhr		0-8
Y	25-40			511	2msst	mfr	25	26	0-6	0-8
5	40-45	104R 5/4	CZ4154256T43	511	1055	mfr	<u> </u>		0-4	0-0
				-						
								-		
Borir	ng#		☐ Boring ☐ Pit	Cround	ourface elev	n.				
				Ground	surface elev	π.	Dep	th to limitir	ng factor	in.
	· ·				·				Soil Appli	cation Rate
Horizon	Depth	Dominant Color	Redox Description	Texture	Structure	Consistence	Boundary	Roots	GP	D/Ft ²
	In.	Munsell	Qu. Az. Cont. Color		Gr. Sz. Sh.				*Eff#1	*Eff#2
		^								
						A-14				
	-			*		neir	INA			
						Allie				
P			8.			20				
							,			
Borir	na #		☐ Boring ☐ Pit							
	.9		∐ Pit	Ground	surface elev	ft.	Dep	th to limitir	ng factor	in. ˙
									Soil Appli	cation Rate
Horizon	Depth	Dominant Color	Redox Description	Texture	Structure	Consistence	Boundary	Roots	1	D/Ft ²
	ln.	Munsell	Qu. Az. Cont. Color		Gr. Sz. Sh.		-		*Eff#1	*Eff#2
	,									
										ļ
			e e							

Boring

^{*} Effluent #1 = BOD, $> 30 \le 220$ mg/L and TSS $> 30 \le 150$ mg/L

^{*} Effluent #2 = BOD, > $30 \le 220 \text{ mg/L}$ and TSS > $30 \le 150 \text{ mg/L}$

Ron Welsch (115) 309 9739 Ste@ N 6160 370'Street SEISE 17-28-13WMensman



e tant house

doweway 995 TOOLINE dripeway B.m=100.0 veit nail in post 6(0) topol mound 10/5 AFB standue 14 % 0 Slope MEDAL Follow 1020 10' Kock lengt oteres person 1000 N

> 0 10' 20' 30' 40' Scale 14=40'

Will Heidt Soil Testing W3503 Hemlock Road Mondovi, WI 54755 (715) 579-9584

> : d.no. 227872 June 29, 2023 William Sefect

va.sgons ee	partizent of Industry,
Labor and Hu	partreent of Industry, man Relations
Safety and Bu	uldings Division

PRIVATE SEWAGE SYSTEM **INSPECTION REPORT** (ATTACH TO PERMIT)

count	, .		
C F	CE	17	

28-13

תנ	יננט	1/	-20-	
anita	y Per	mit	No.:	

161680 State Plan ID No.:

S93-20033

Parcel Tax No.: 281317.404°5 Lot 2 CSM #1117

GENERAL INFORMATION

Permit Holder's Name: ☐ City ☐ Village ☐ Town of: Menomonie Ron Meyers-Welsch CST BM Elev.: Insp. BM Elev.: BM Description: 100 100' Top of telephone ped.

TANK INFORMATION								
TYPE	MANUFACTURER	CAPACITY						
Septic	Huffcutt	1000 ea.						
Dosing	Huffcutt	1000						
Aeration								

7								
TYPE	TYPE MANUFACTURER							
Septic	Huffcutt	1000 ea.						
Dosing	Huffcutt	1000						
Aeration								
Holding								

TANK SETBACK INFORMATION

TANK TO	P/L	WELL	BLDG.	Vent to Air Intake	ROAD
Septic	112'	*	13'		NA
Dosing	114'	*	105'	108'	NA
Aeration					NA
Holding					

PUMP / SIPHON INFORMATION

Manu	factur	Н	ydron	natio	2			Dei	mand	
Mode	l Numl	ber	S	W25					20	GPM
TDH	Lift	9.32	Fri	ction	.34	Syster Head	n 2.5	TI	DH ₁₂	.1&t
Force							Dist. T			*

ELEVATION DATA

016-	1/13	-08
T	<u> </u>	- 0

STATION	BS	н	FS	ELEV.
Benchmark				100
Bldg. Sewer				
St/Ht Inlet				100.71
St/Ht Outlet				100.37
Dt Inlet				93.63
Dt Bottom				90.46
Header / Man.				99.78
Dist. Pipe				99.79
Bot. System				99.01
Final Grade				101.50

SOIL ABSORPTION SYSTEM

BED / TRENCH DIMENSIONS	Width	Length	No. Of T	renches	PIT DIMENSIONS	No. Of Pits	Inside Dia.	Liquid Depth
SETBACK	SYSTEM TO	P/L	BLDG	WELL	LAKE/STREAM	LEACHING CHAMBER	Manufacturer:	
INFORMATION	Type Of System: mour	nd **	136'	*		OR UNIT	Model Number:	

DISTRIBUTION SYSTEM

Header / Manifold	Distribution Pipe(s)	x Hole Size	x Hole Spacing	Vent To Air Intake
Length Dia	Length <u>86.</u> 25 d ia. <u>2"</u> Spacing	1/4"	5 . 75'	

SOIL COVER

x Pressure Systems Only

xx Mound Or At-Grade Systems Only

Depth Over	Depth Over	xx Depth Of	xx Seeded/Sodded	xx Mulched
Bed / Trench Center 1.5'	Bed / Trench Edges 1.0'	Topsoil 6"	☐ Yes 🏖 No	☐ Yes 【【】No

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

Use other side for additional inform

⊠ No			
ation.	05	10	93

Incont	or's Cianatu	

0	0	5	2

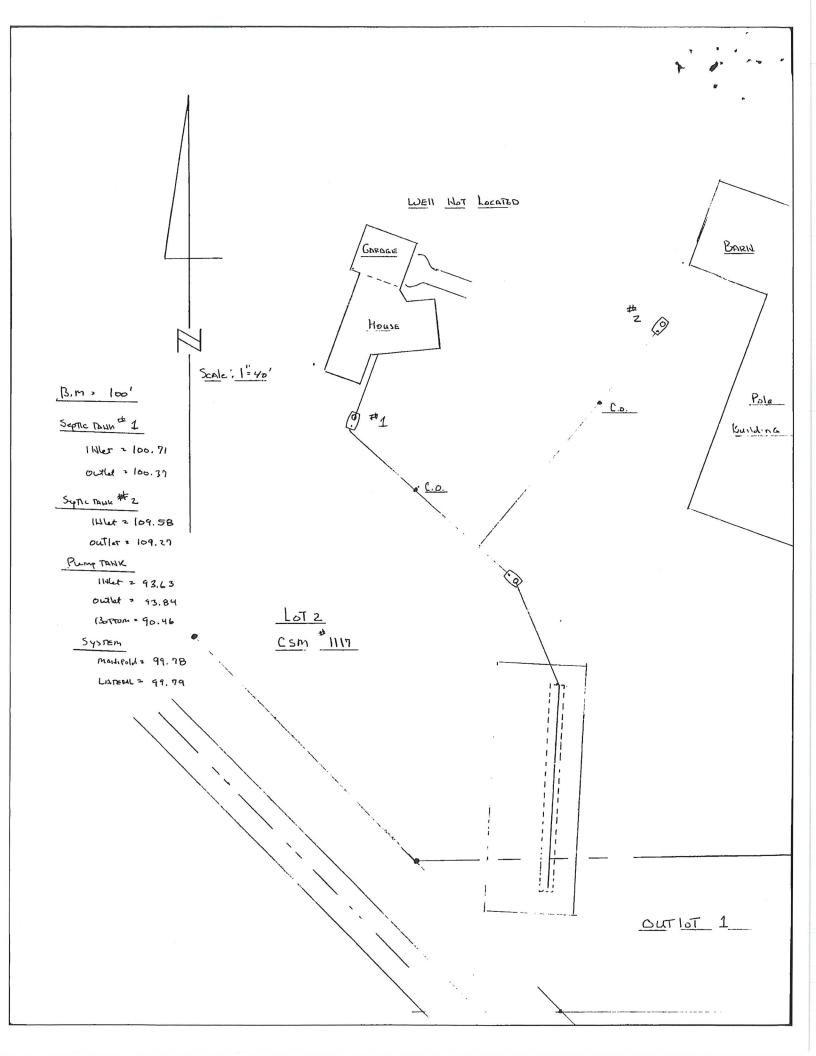
SBD-6710 (R 05/91)

Date

Cert No.

^{*} Well not located.

^{**}Mound system encorachment into Outlot 1



SOIL AND SITE EVALUATION REPORT

Page _ 1 _ of _ 3 _

in accord with ILHR 83.05, Wis. Adm. Code

Attach complete site plan on paper not less than 8 1/2 x 11 inches in size. Plan must include, but

COUNTY		
Dunn		
PARCEL I.D. #	7 200 4	
BEVIEWED BY	DATE	_

not limited dimension	to vertica ed, north	al and hor arrow, ar	izontal reference pond location and dista	int (BM), direction	on and %	of slope,	scale or	PARCELI	.D.#			
APPLICA	NT INFO	ORMATI	ON-PLEASE PRI	NT ALL INFO	RMATIO	N		REVIEWE	D BY		DATE	
	Y OWNER eyers-Wel		yer) old Tra	sk property			RTY LOCATION LOT SE 1/4	SE 1/4,S 17	T 28	,N,R 1	3	w
1802 E	PROPERTY OWNER'S MAILING ADDRESS 1802 E. 11th						-	JBD. NAME OR (
CITY, STA Menomo		54751		PHONE NUMBER (715) 235-839	92	CITY	□VILLAGE {\\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\	TOWN	NEARES 370th			
Menomonie, WI 54751												
				SOIL DESC	CRIPTI	ON RE						- 0 1
	Horizon	Depth in.	Dominant Color Munsell	Mottles Qu. Sz. Cont. 0	Color	exture	Structure Gr. Sz. Sh.	Consistence	Boundary	Roots		7/ft ² Trench
1	1	0-8	10YR 4/2	_		sil	2 m sbk	mvfr	as	1f	.5	.6
	2	8–40	10YR 4/4			sil	3 c-m abk	mvfr	CS	1f	.5	.6
	_											

B	01	il	าต	#

Ground elev. 98.6 ft.

Depth to limiting factor 40"

	OOL DECOME FOR THE ONE									
Horizon	Depth in.	Dominant Color Munsell	Mottles Qu. Sz. Cont. Color	Texture	Structure Gr. Sz. Sh.	Consistence	Boundary	Roots		D/ft ² Trench
									Dea	Halai
1	0–8	10YR 4/2	_	sil	2 m sbk	mvfr	as	1f	.5	.6
2	8-40	10YR 4/4	-	sil	3 c-m abk	mvfr	cs	1f	.5	.6
3	40-47	10YR 4/4	f2d 7.5YR 4/6	si	O m	-	-	-	NP	.2
		slight sidew	vall seepage observ	ed @ 42"			THE STATE OF THE S			

Boring



Ground elev. 95.5 ft.

Depth to limiting factor 35"

Remark	s:									
1	0–5	10YR 4/2	_	sil	2 f-m sbk	mvfr	cs	1f	.5	.6
2	5-35	10YR 4/4	- '	sil	3 m sbk	mvfr	gs	1f	.5	.6
		w/ c2p 10YR 6/	'2 - 7.5YR 5/8 vert	ically or	iented root m	ottling				
3	35-56	10YR 4/4	c3p 7.5YR 6/3	si	O m	_	_	-	NP	.2
			some mots w/ & :	some w/ou	t roots					
		,	2							

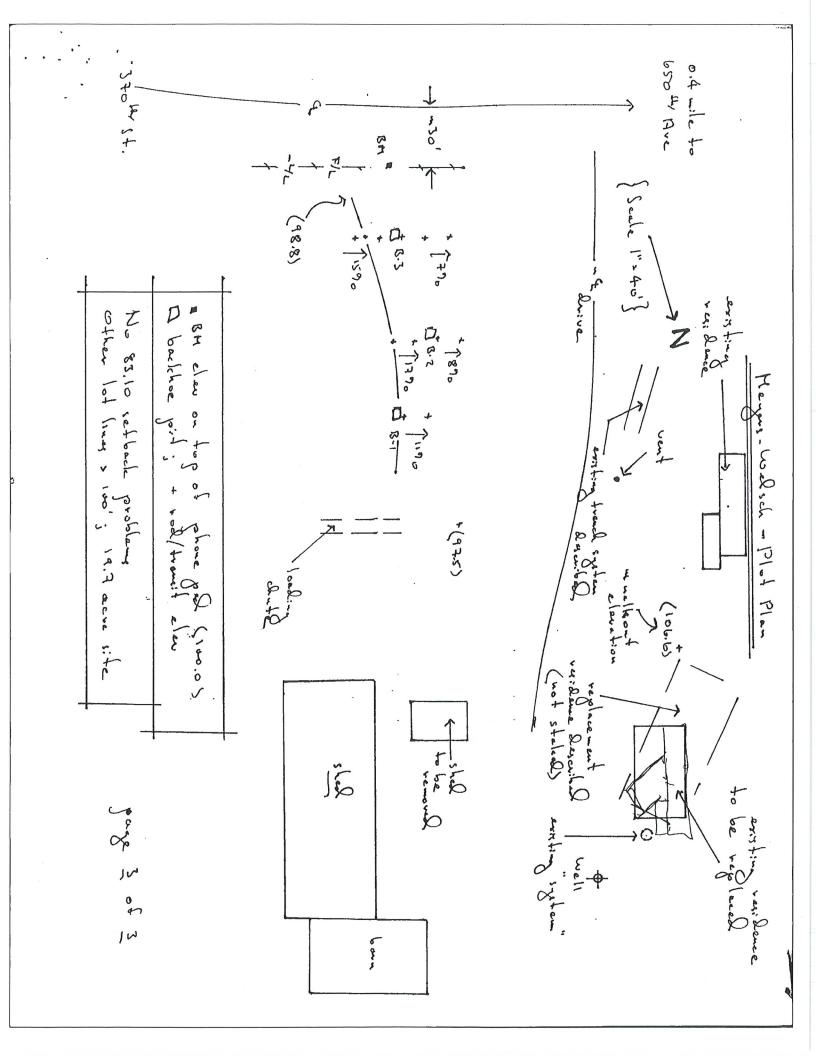
Н	lei	n	a	rK	S	:
Н	lei	n	a	rK	S	:

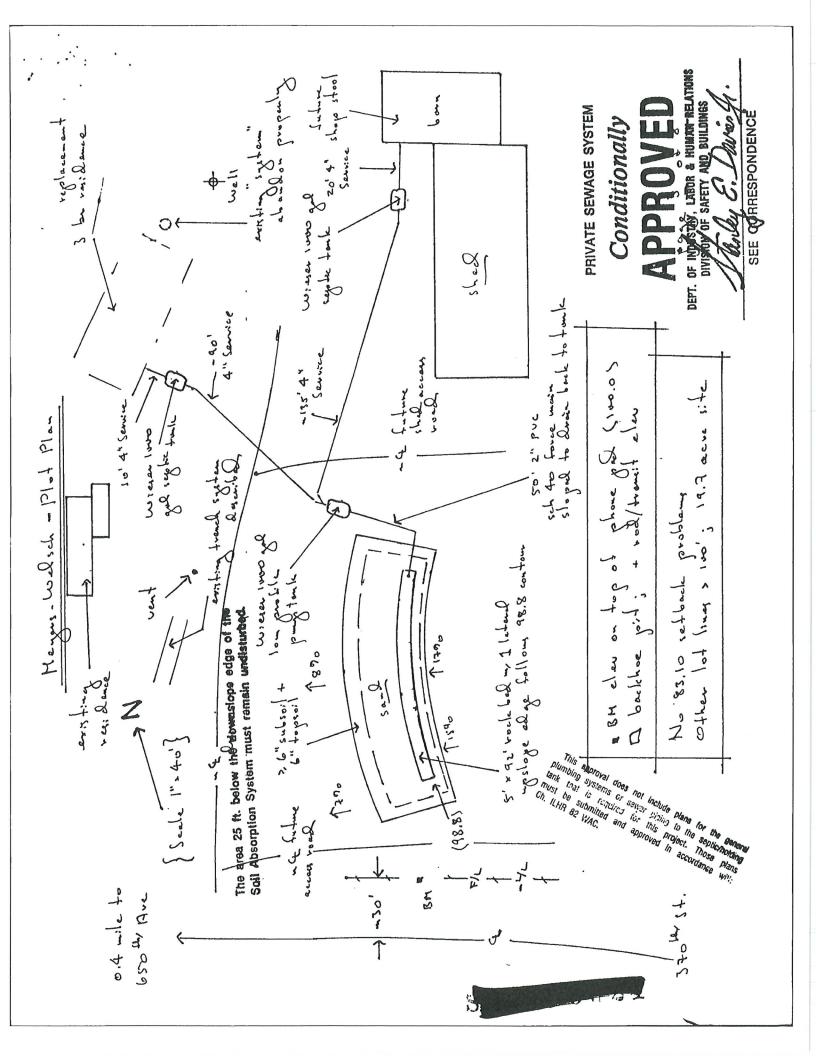
CST Name:—I	Please Print		Phone:		
	Henry F. Grote			715-665-2681	
Address:	PO Box 57, Knapp, WI 54749-00	57 1 8 00			
Signature:		Hunti Sha	Date:	12/30/92	CST Number: 3065

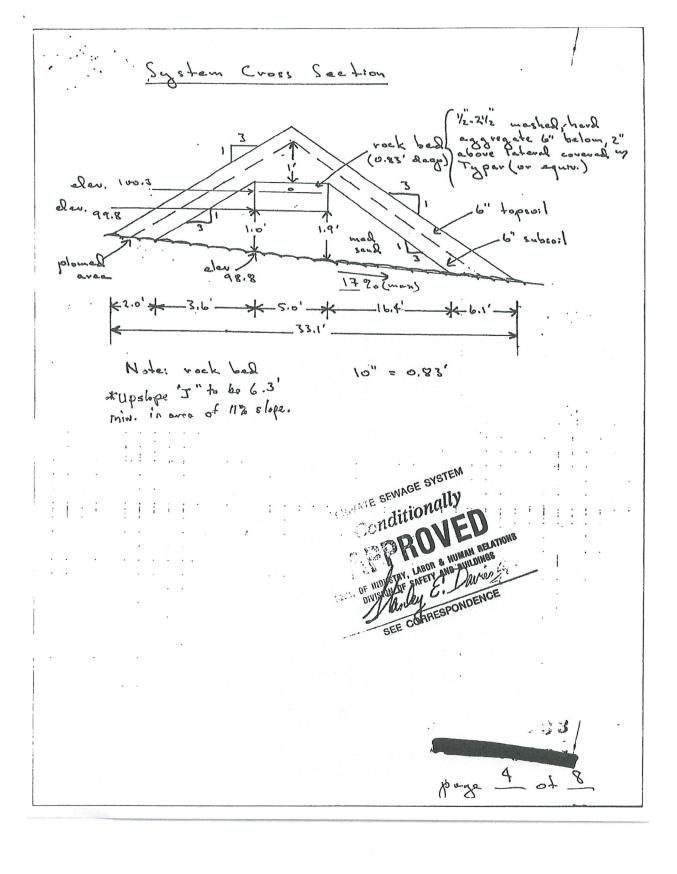
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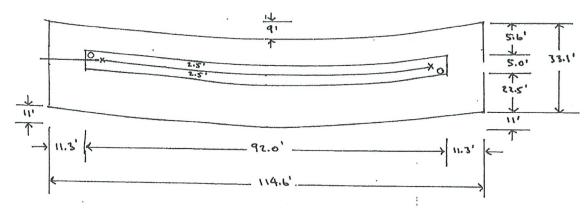
Page 2 . of 3

Horizon	Depth	Dominant Color	Mottles	Texture	Structure	Consistence	Boundary	Roots	G
	101.	Munsell	Qu. Sz. Cont. Color	-	Gr. Sz. Sh.				В
2	0-4 4-33	10YR 4/2 10YR 4/4		sil sil	2 c-m sbk 3 m sbk	mvfr mvfr	as cs	1f 1f	.5
	4-33				J III SUK	IIIVIT	US	11	.,
		w/ f3p vertica	lly oriented root m	nots					
3	33-45	10YR 4/4	c3p R=Gy	si	Om	-	-	_	NP
		sidewall	seepage @ 33"						
Remark	s:								
									П
									-
					1111				_
									_
								<u> </u>	
Remark	s:								
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Remark	s:	1					T		
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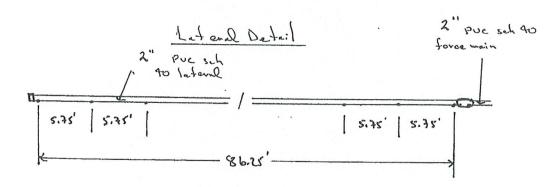








x: " steel Rebox (or equiv.) lateral end markers driven to find grade o: 4" Puc capped observation mells to bottom of rock bed Note: "Internal terminates 2.88" from ends of rock bad



. 1/4" holse on lateral center bottom line @ 69.0" aport (5.75')

(16) (1.17 E DEVIAGE SYSTEM .72 your total discharge @ 2.5' hoad Conditionally

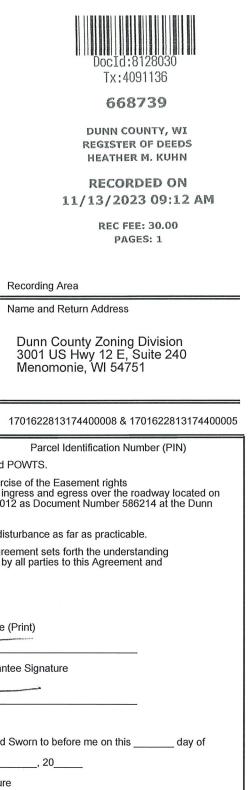
Planky E. LAWES
SEE CORRESPONDENCE

P8 5 0 8

Sanitary Easement

Document Number

Document Title



Agreement Date:

Parcel 1 Landowner(s): Ronald D. Welsch & Naomi A. Cummings

Parcel 1 Identifier Number: 1701622813174400008

Parcel 1 Legal Description:

Outlot One of Certified Survey Map No. 1117, Recorded in Volume 4 of Certified Survey Maps, Page 182 as Document #400153, Dunn County Records, Town of Menomonie, Dunn County,

Parcel 2 Landowner(s): Ronald D. Welsch & Naomi A. Cummings

Parcel 2 Identifier Number: 1701622813174400005

Parcel 2 Legal Description:

Lot 2 of Certified Survey Map No. 1117, Recorded in Volume 4 of Certified Survey Maps, Page 182 as Document #400153, Dunn County Records, Town of Menomonie, Dunn County,

This Sanitary Easement Agreement is granted by Parcel 1 Landowners, Grantor, to Parcel 2 Landowners, Grantee.

WHEREAS, Grantor is giving perpetual sanitary easement for a replacement Private On-site Wastewater Treatment System (POWTS) designed to be installed partially on Parcel 1 and to service the dwelling and structures located on Parcel 2. This easement is specifically for the purposes of construction, maintenance, repair and reconstruction of the Mound components of said POWTS.

The Grantor reserves the right to use the Easement for purposes that will not interfere with the exercise of the Easement rights granted in this Agreement. The location and functioning of said POWTS shall not interfere with the ingress and egress over the roadway located on Parcel 1, as agreed upon in the document titled "Road Maintenance Agreement", Recorded 3/23/2012 as Document Number 586214 at the Dunn County Register of Deeds.

Grantee shall restore the ground surface of the sanitary easement area to its condition before the disturbance as far as practicable.

This easement shall be binding upon the Grantor and their heirs, successors and assigns. This agreement sets forth the understanding of the parties and may not be changed except by a written document executed and acknowledged by all parties to this Agreement and duly recorded in the office of the Register of Deeds, Dunn County, Wisconsin.

Acknowledgement: Grantor Name (Print)

Grantee Name (Print)	
Notarized Grantee Signature	
Subscribed and Sworn to before me on this, 20	day of
Notary Signature	
My Commission expires:	_

Drafted By: Dunn County Zoning

THIS PAGE IS PART OF THIS LEGAL DOCUMENT – DO NOT REMOVE.

This information must be completed by submitter: document title, name & return address, and PIN (if required). Other information such as the granting clause, legal description, etc., may be placed on this first page of the document or may be placed on additional pages of the

WRDA Rev. 12/22/2010

