

Environmental Services Department

Planning and Zoning Division
800 Wilson Avenue, Room 310
Menomonie, WI 54751
Telephone: 715.231.6521
Fax: 715.232.4099

May 4, 2018

According to State Statutes and Chapter 6 of the Dunn County Code of Ordinances, all owners of septic systems in the County shall participate in the private onsite waste treatment systems maintenance program. The maintenance program requires all septic tanks to be inspected and/or pumped every three years. As per 145.245(3) Wisconsin State Statutes and Chapter 6 of the Dunn County Code of Ordinances, you are required to be contacted by the Dunn County Zoning Office informing you of your responsibility to provide maintenance on the system.

Inspections shall be conducted by a licensed master plumber, licensed journeyman plumber, licensed restricted plumber or licensed septic tank pumper. The inspection shall certify that the system is in proper operating condition and the septic tank is less than 1/3 full of sludge and scum. If the inspection reveals sludge and scum volume to be greater than 1/3 the volume of the tank, the tank shall be pumped by a licensed septic tank pumper. You may decide to have your septic tank pumped without an initial inspection.

In either case, return this letter **within 90 days** with the appropriate signature. Septic tank maintenance ensures maximum service life of your private sewage system and may avoid premature failure and very costly replacement.

As per 83.54.4(d) 1. Except as provided in subparagraph 3, a POWTS that exists prior to July 1, 2000, and that utilizes a treatment or dispersal component consisting in part of in situ soil shall be visually inspected at least once every 3 years to determine whether wastewater or effluent from the POWTS is ponding on the surface of the ground.

As per NR 113.07(1)(b)2 Waste removed from septic systems due to a routine pumping may not be land applied during months when the ground is frozen or snow covered. Waste removed in these pumping situations shall be taken to a publicly owned wastewater treatment work (POTW).


Dunn County Sanitary Maintenance Certification Form

*(Please have your pumper/inspector **check off the boxes and complete** remainder of form)

- The septic tank was recently pumped by a licensed septic tank pumper.
- The septic tank was inspected and is less than 1/3 full of sludge and scum.
- The effluent filter has been inspected and/or cleaned. *Note – All systems approved after July 1, 2000 were required to have an effluent filter installed in the septic tank.*
- The drainfield was visually inspected, and there is no ponding/surfacing.
- The private sewage disposal system is in proper operating condition.

Comments: _____

The undersigned certify that the system was inspected and is functioning properly: _____

	<u>83798</u>	<u>5.17.18</u>
Pumper/Inspector Signature	License Number	Date of Pumping/Inspection

RETURN TO:
Dunn County Zoning Office
800 Wilson Ave. Room 310
Menomonie, WI 54751

Year of installation
or replacement _____

513895

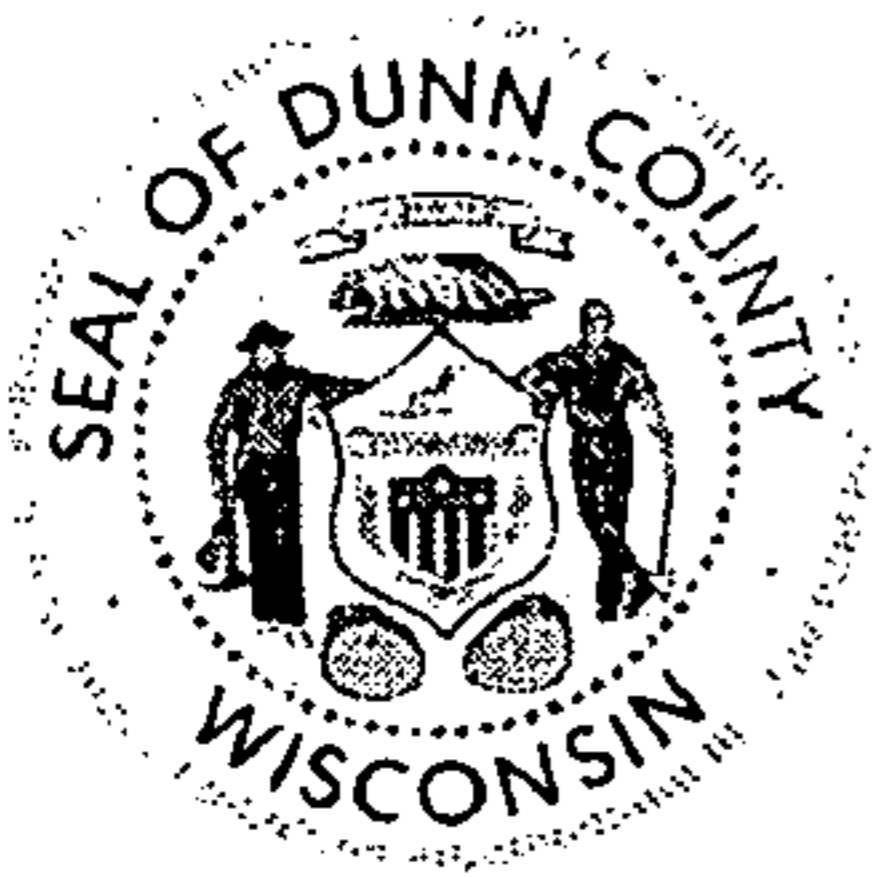
R.C.
1702422812314100014
31-28-12-41

Lot/CSM/Sub. & Parcel Address

Douglas Hastings
E5663 507th Ave
Menomonie, WI 54751

E 5663 507th AVE

Timber Ridge



Environmental Services Department

Land Conservation, Planning, Solid Waste

Surveying, and Zoning Divisions

390 Red Cedar St., Suite C, Menomonie, WI 54751

Telephone: 715.231.6521

FAX: 715.232.4099

September 8, 2014

A private sewage system or replacement was installed on property you own during the year listed below. As per 145.245(3) Wisconsin State Statutes and Chapter 6 of the Dunn County Comprehensive Zoning Ordinance (1993), you are required to be contacted by the Dunn County Zoning Office informing you of your responsibility to provide maintenance on the system. This maintenance program requires inspection of or pumping of the private sewage system at least once every three years.

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In either case, please return this letter within 45 days with the appropriate signatures. Septic tank maintenance will ensure maximum service life of your private sewage system and avoid premature failure and very costly replacement. **Filing of this signed letter will alert future buyers of this property, that required maintenance was or was not performed. This will be the only contact from this office.**

Inspection of the private septic system components reveal that it does require pumping at this time. Contact septic pumper for service. (PLEASE INDICATE IF PUMPING WAS COMPLETED BEFORE MAILING BACK THIS FORM)

Date of inspection _____

Signature of inspector and license number

I certify that the septic system on the property mentioned below is not ponding on the ground surface or backing up into the structure, and that the septic tank has been visually inspected and pumped. (To be completed by septic tank pumper only)

Don Huff 2393 _____ Date of pumping 10-1-2014

Signature of septic tank pumper and license number

Inspection of the private septic system components reveal that the system does not require pumping at this time.

Date of inspection _____

Signature of inspector and license number

RETURN TO:

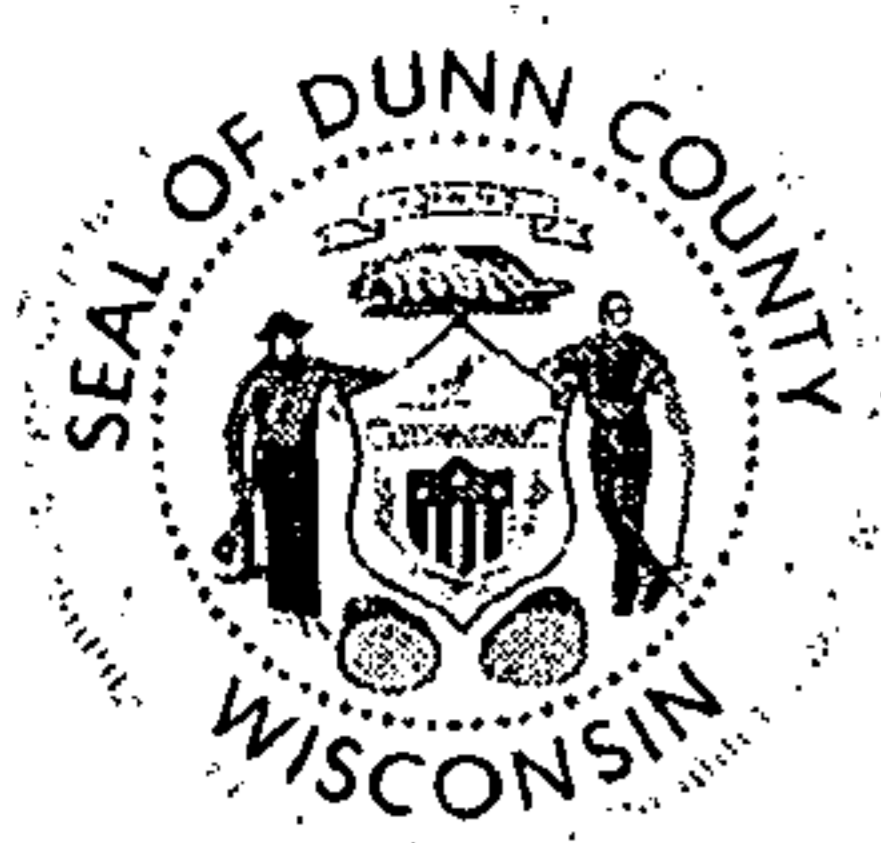
Dunn County Zoning Office
390 Red Cedar St. Suite C
Menomonie, Wisconsin 54751
513895 024 281231.40114

**Year of installation
or replacement**
2008

Lot/CSM/Sub. & Parcel Address

JOSEPH J & MISTI
HUTH
E5663 507TH AVE
MENOMONIE WI 54751

27 TIMBER RIDGE
E5663 507TH AVE



Environmental Services Department
Land Conservation, Planning, Solid Waste
Surveying, and Zoning Divisions

Telephone: 715.231.6521
FAX: 715.232.4099

June 24, 2011

A private sewage system or replacement was installed on property you own during the year listed below. As per 145.245(3) Wisconsin State Statutes and Chapter 6 of the Dunn County Comprehensive Zoning Ordinance (1993), you are required to be contacted by the Dunn County Zoning Office informing you of your responsibility to provide maintenance on the system. This maintenance program requires inspection of or pumping of the private sewage system at least once every three years.

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Date of inspection
Signature of inspector and license number
I certify that the septic system on the property mentioned below is not ponding on the ground surface or backing up into the structure, and that the septic tank has been visually inspected and pumped. (To be completed by septic tank pumper only)
Signature of septic tank pumper and license number
Date of pumping
Inspection of the private septic system components reveal that the system does not require pumping at this time.
Date of inspection
Signature of inspector and license number

RETURN TO:

Dunn County Zoning Office
390 Red Cedar St. Suite C
Menomonie, Wisconsin 54751
513895 024 281231.40114

Year of installation
or replacement
2008

Lot/CSM/Sub. & Parcel Address

JOSEPH J & MISTI
HUTH
E5663 507TH AVE
MENOMONIE WI 54751

27 TIMBER RIDGE
E5663 507TH AVE

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

Name	Timber Ridge Homes	
Address	N5049 553 rd St.	
City	Menomonie	
State & Zip	WI	54751

PLUMBER:	CST:
Chris Bauer	Loretta Larrabee

GENERAL INFORMATION

CST BM Elev.: 100	Insp. BM Elev.: 100
BM Description: Base of lot corner iron pipe.	

TANK INFORMATION

TYPE	MANUFACTURER	CAPACITY
Septic	Wieser	1000
Dosing	Combo	600

TANK SETBACK INFORMATION

TYPE	P/L	WELL	BLDG	VENT TO AIR INTAKE
Septic	71	*	40	
Dosing	71	*	40	

PUMP/SIPHON INFORMATION

Manuf/Model #	Franklin Elect. SE 40		
Lift	Friction Loss	System Head	TDH Ft.
10.57	1.46	3.25	15.27
Forcemain	Length	Dia	Dist. to Well
	75'	2"	*

SOIL ABSORPTION SYSTEM

Dispersal Cell Information	Manuf:	Width 6'	Length 75'	No. of Cells	
Setback	Type of System	P/L	Bldg	Well	Lake/Stream
Information	Mound	30'	108'	*	

DISTRIBUTION SYSTEM

Header/Manifold	Distribution pipe(s)	X Hole Size	X Hole Spacing
Length 36" Dia. 1½	Length 73.5 Dia. 1½ Spacing 36"	3/16	42"

WI FUND: Yes No Maybe
REASON: _____

COMMENTS:
No well at time of inspection.

New House/Double Wide	X
New Mobile Home	
New Other	
Replace/Repair/Reconnect	

6/24/08
Date

M. Helgeson
Inspector's Signature

224978
Cert. No.

Property Address/City	E5663 507 TH AVE. MENOMONIE, WI 54751
Town of	RED CEDAR
Legal	Lot 27
Subdivision	Timber Ridge
CSM #	
Sanitary permit #	513895
State Plan ID #	1521978
Parcel tax #	281231.40114
Computer #	024-1407-08

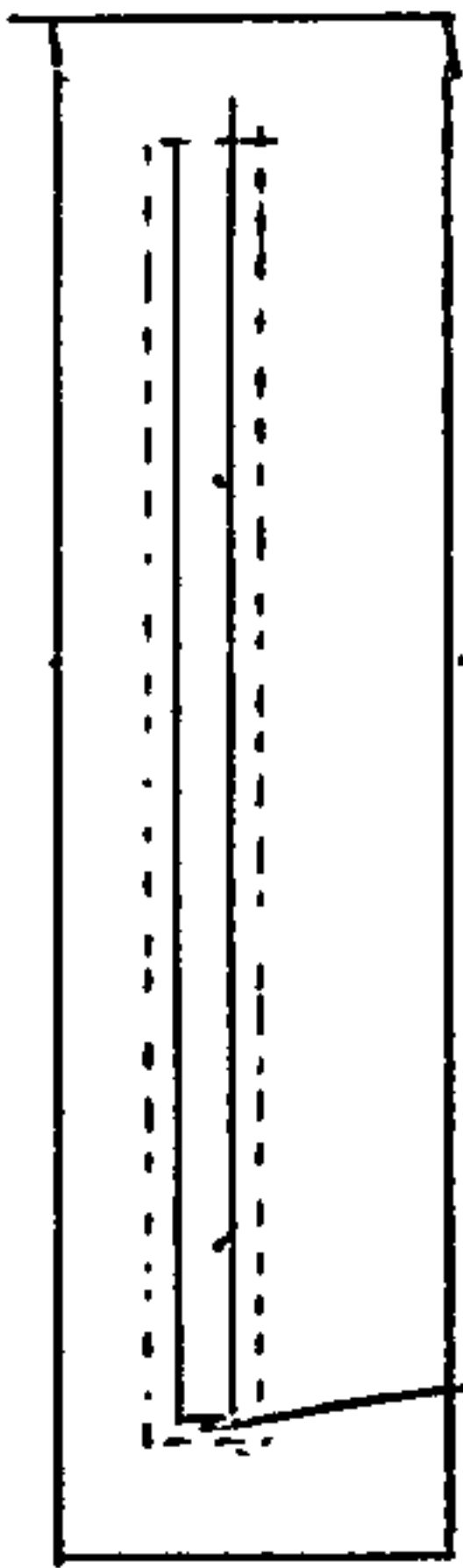
ELEVATION DATA

STATION	ELEVATION	ELEVATION
Benchmark		100.00
Well		
Bldg. Sewer		88.76
St/Ht Inlet		87.96
St/Ht Outlet		
Dt. Inlet		
Dt. Bottom		84.45
Header/Man		95.02
Dist. Pipe		95.00
Bottom of system		94.25
House foundation at SW corner		98.01

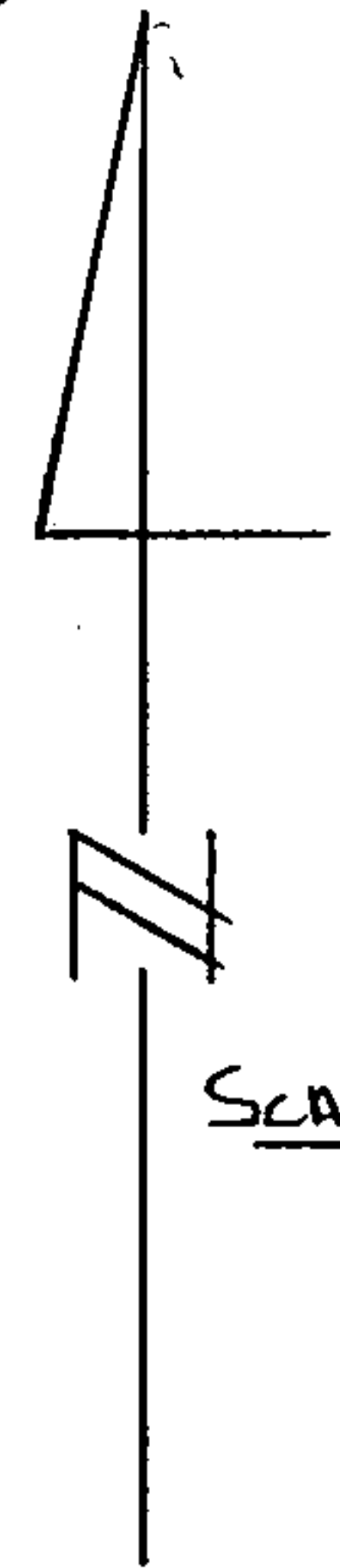
LOT 27

Timber Ridge

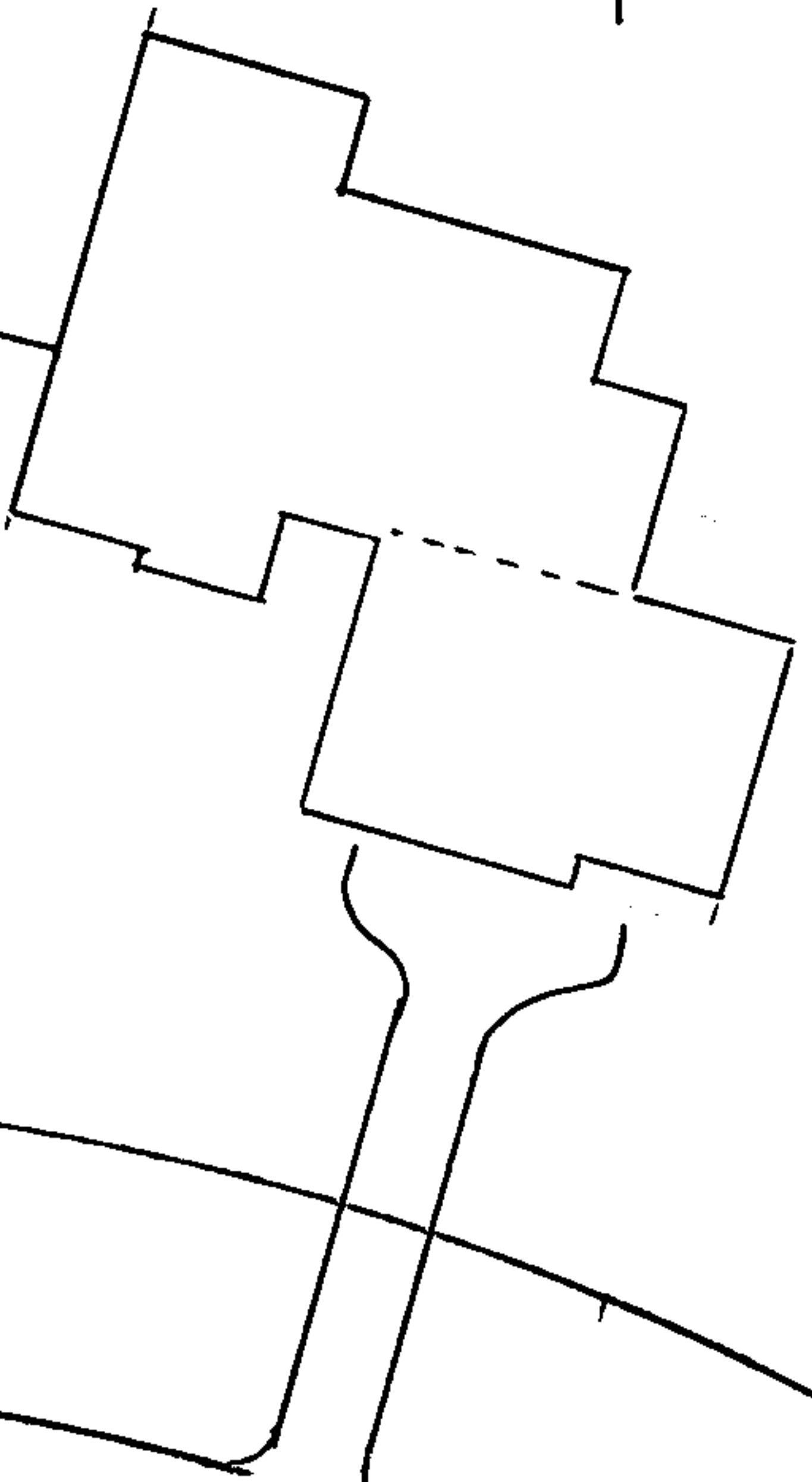
STORM WATER DETENTION AREA



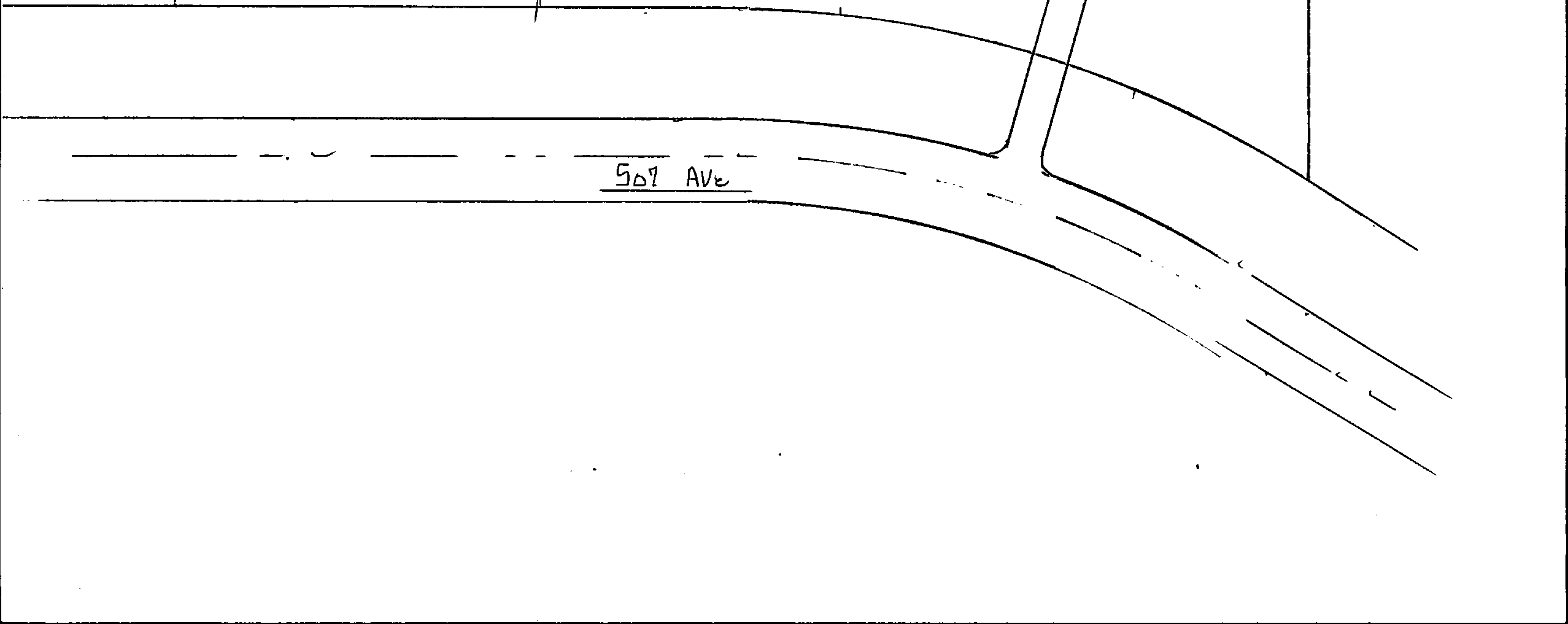
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Scale: 1"=40'



507 Ave



system \$350.00
 \$425.00 permit

County ~~fire~~ \$ 75.00



Safety and Buildings Division
 201 W. Washington Ave., P.O. Box 7162
 Madison, WI 53707-7162

Sanitary Permit Number (to be filled in by Co.)

513895

Sanitary Permit Application

In accordance with s. Comm. 83.21(2), Wis. Adm. Code, submission of this form to the appropriate governmental unit is required prior to obtaining a sanitary permit. Note: Application forms for state-owned POWTS are submitted to the Department of Commerce. Personal information you provide may be used for secondary purposes in accordance with the Privacy Law, s. 15.04(1)(m), Stats.

State Transaction Number

Trans. id 1521978
 Project Address (if different than mailing address)

I. Application Information - Please Print All Information

Property Owner's Name

Timber Ridge Homes (Jamie Winsand)

Parcel #

281231.40114

Property Owner's Mailing Address

N5049 553 Street

Property Location

Govt. Lot

NE 1/4 SE 1/4 Section 31
 T 28 N; R 12 E or W

City, State

Menomonie, WI

Zip Code

54751

Phone Number

715/505-0782

II. Type of Building (check all that apply)

1 or 2 Family Dwelling - Number of Bedrooms three

Lot #

27

Public/Commercial - Describe Use _____

State Owned - Describe Use _____

Block #

CSM Number

Subdivision Name

Timber Ridge

City of _____

Village of _____

Town of Red Cedar

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

A.	<input checked="" type="checkbox"/> New System	<input type="checkbox"/> Replacement System	<input type="checkbox"/> Treatment/Holding Tank Replacement Only	<input type="checkbox"/> Other Modification to Existing System (explain)
B.	<input type="checkbox"/> Permit Renewal Before Expiration	<input type="checkbox"/> Permit Revision	<input type="checkbox"/> Change of Plumber	<input type="checkbox"/> Permit Transfer to New Owner

List Previous Permit Number and Date Issued

IV. Type of POWTS System/Component/Device: (Check all that apply)

Non-Pressurized In-Ground Pressurized In-Ground At-Grade Mound ≥ 24 in. of suitable soil Mound < 24 in. of suitable soil
 Holding Tank Other Dispersal Component (explain) _____ Pretreatment Device (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
450	0.5	900 base 1 450 bed	1312 base 1 450 bed	93.97'

VI. Tank Info

	Capacity in Gallons		Total Gallons	# of Units	Manufacturer	Prefab Concrete	Site Constructed	Steel	Fiber Glass	Plastic
	New Tanks	Existing Tanks								
Septic or Holding Tank	1000	-	1000	1	Wieser Concrete	X				
Dosing Chamber	600	-	600		combo	X				

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
Chris Bauer		MP220684	715/672-8224
Plumber's Address (Street, City, State, Zip Code)			
N6483 Dorwin Mill Rd., Durand, WI 54736			

VIII. County/Department Use Only

<input checked="" type="checkbox"/> Approved	<input type="checkbox"/> Disapproved	Permit Fee	Date Issued	Issuing Agent Signature
<input type="checkbox"/> Owner Given Reason for Denial		\$ 350	4-7-08	

IX. Conditions of Approval/Reasons for Disapproval

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

024-1407-08

3/28/08
County

commerce.wi.gov



Safety and Buildings
3824 N CREEKSIDE LA
HOLMEN WI 54636
TDD #: (608) 264-8777
www.commerce.wi.gov/sb/
www.wisconsin.gov

Jim Doyle, Governor
Jack L. Fischer, A.I.A., Secretary

March 26, 2008

CUST ID No. 224580

ATTN: POWTS Inspector

LORETTA LARRABEE
L & L PERC TESTING
N2089 CTY RD Y
MENOMONIE WI 54751

ZONING OFFICE
DUNN COUNTY SPIA
800 WILSON AVE
MENOMONIE WI 54751

**CONDITIONAL APPROVAL
PLAN APPROVAL EXPIRES: 03/26/2010**

Identification Numbers
Transaction ID No. 1521978
Site ID No. 735633
Please refer to both identification numbers, above, in all correspondence with the agency.

SITE:

Timber Ridge
507TH Ave
Town of Red Cedar
Dunn County
NE1/4, SE1/4, S31, T28N, R12W
Lot: 27,

FOR:

Description: Mound / Three Bedroom / Sloping Site
Object Type: POWTS Component Manual Regulated Object ID No.: 1175634
Maintenance required; 450 GPD Flow rate; 28 in Soil minimum depth to limiting factor from original grade;
System: Mound Component Manual - Version 2.0, SBD-10691-P (N.01/01),
Pressure Distribution Component Manual - Version 2.0, SBD-10706-P (N.01/01); Biofilter

The submittal described above has been reviewed for conformance with applicable Wisconsin Administrative Codes and Wisconsin Statutes. The submittal has been **CONDITIONALLY APPROVED**. 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.

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

Reminders

- This system is to be constructed and located in accordance with the enclosed approved plans and with the component manuals listed above.
- Per manual cited above, limited activities are allowed in the area 15 feet down slope of the component area. Soil compaction, excavation, vehicular traffic and other similar activities that impact the treatment and dispersal are prohibited.
- The well must be a minimum of 25 feet from any POWTS tank, and a minimum of 50 feet from the absorption area. chs. NR 811 & 812c
- A Sanitary Permit must be obtained from the county where this project is located in accordance with the requirements of Sec. 145.135 and 145.19, Wis. Stats.
- Inspection of the POWTS installation is required. Arrangements for inspection shall be made with the designated county official in accordance with the provisions of Sec. 145.20(2)(d), Wis. Stat

Conditionally
APPR
DEPARTMENT OF SAFETY
Charles
SEE CORRECTIONS

- Comm 83.22(7) 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.

Owner Responsibilities:

- **Comm 83.52 Responsibilities.** The owner of a POWTS shall be responsible for ensuring that the operation and maintenance of the POWTS occurs in accordance with this chapter and the approved management plan under s. **Comm 83.54(1).**
- **Comm 83.52(2)** A POWTS that is not maintained in accordance with the approved management plan or as required under s. **Comm 83.54(4)** shall be considered a human health hazard.
- **Comm 83.55** The owner is responsible for submitting a maintenance verification report acceptable to the county for maintenance tracking purposes. Reports shall be submitted at intervals appropriate for the component(s) utilized in the POWTS.

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.

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,



Charles L Bratz
POWTS Reviewer II , Integrated Services
(608)789-7893 , 7:45 am - 4:30 pm Monday - Friday
charles.bratz@wisconsin.gov

Fee Required \$	175.00
Fee Received \$	175.00
Balance Due \$	0.00

WiSMART code: 7633

cc: Leroy G Jansky, POWTS Wastewater Specialist, (715) 726-2544 , Friday, 7:00 A.M. To 3:30 P.M.

Notes

**Private On-Site Wastewater Treatment System (POWTS)
Mound and Pressure Distribution Component Design
New Residential application**

Index and Title Sheet

Project Name: *TIMBER RIDGE HOMES*

Owner: Mr. Jamie Winsand

Owner's address: N5049 553rd St., Menomonie, WI 54751

Location: Lot 27 of Timber Ridge on 507th Ave.

Legal Description: NE,SE,31,28 N/R12W

Township/County: Red Cedar township, Dunn county

Contents:	Page 1:	index and title
	Page 2:	general information & lateral diagram
	Page 3:	mound drawings
	Page 4:	dose tank
	Page 5:	pump information
	Page 6:	site plan
	Page 7:	management plan
	Page 8:	contingency plan

Attachment: soil test to state plan

Designer's name and license no.: Loretta Larrabee license# 1872-007

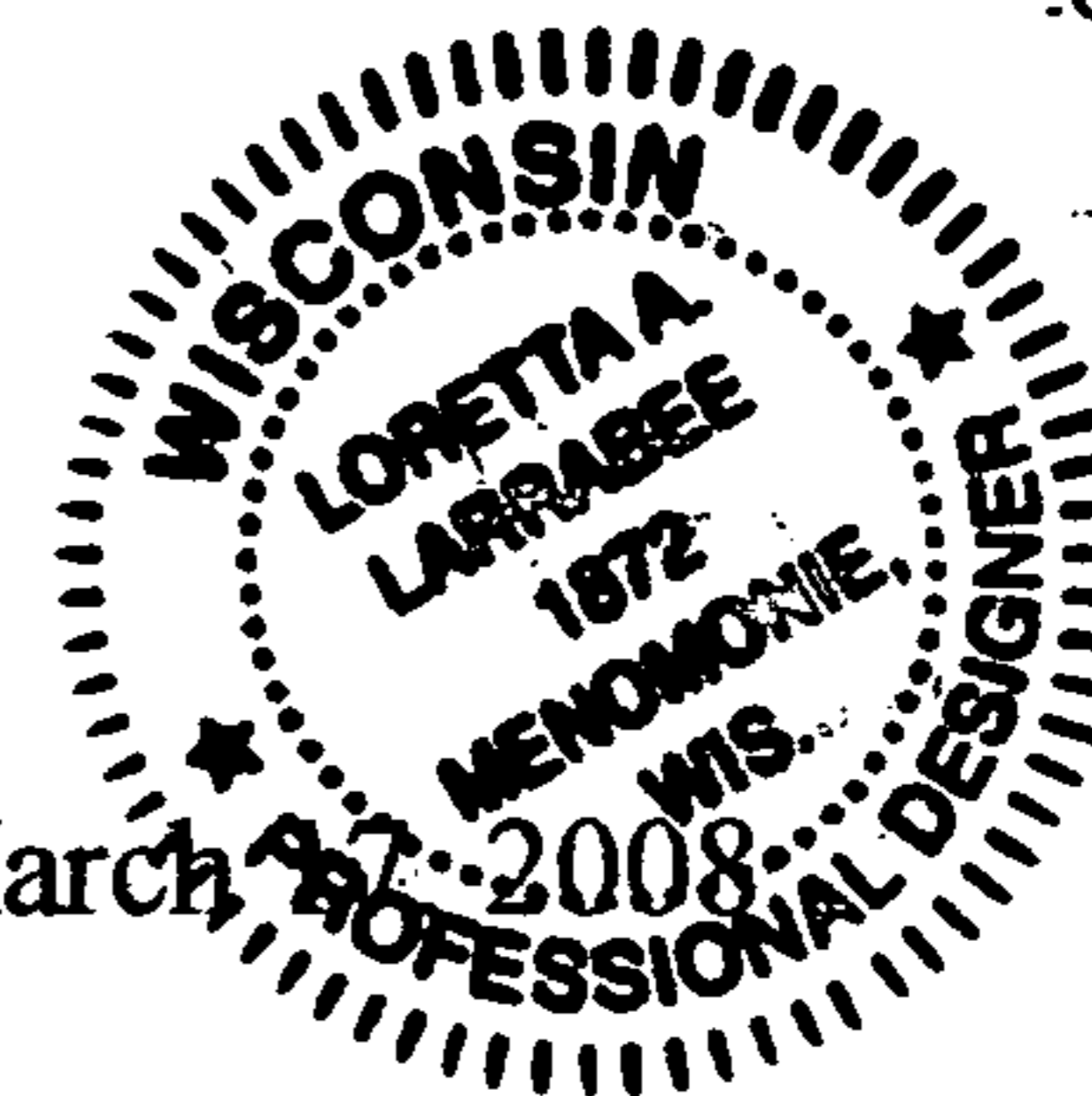
Address: N2089 Cty Rd. Y
Menomonie, WI 54751

Phone: 715/664-8184

Cell: 715/308-1668

E-mail: lanlperctestng@wwt.net

onally
OVED
OF COMMERCE
AND BUILDINGS
B. Larrabee
RESPONDENCE



Designer's Signature: *Loretta Larrabee*

Date: March 27, 2008

I the undersigned submitted these plans under my authority

Mound component manual for POWTS Version 2.0 SBD-10691-P (N.01/01), and Pressure Distribution component manual – Version 2.0 SBD-10706-P (N.01/01)

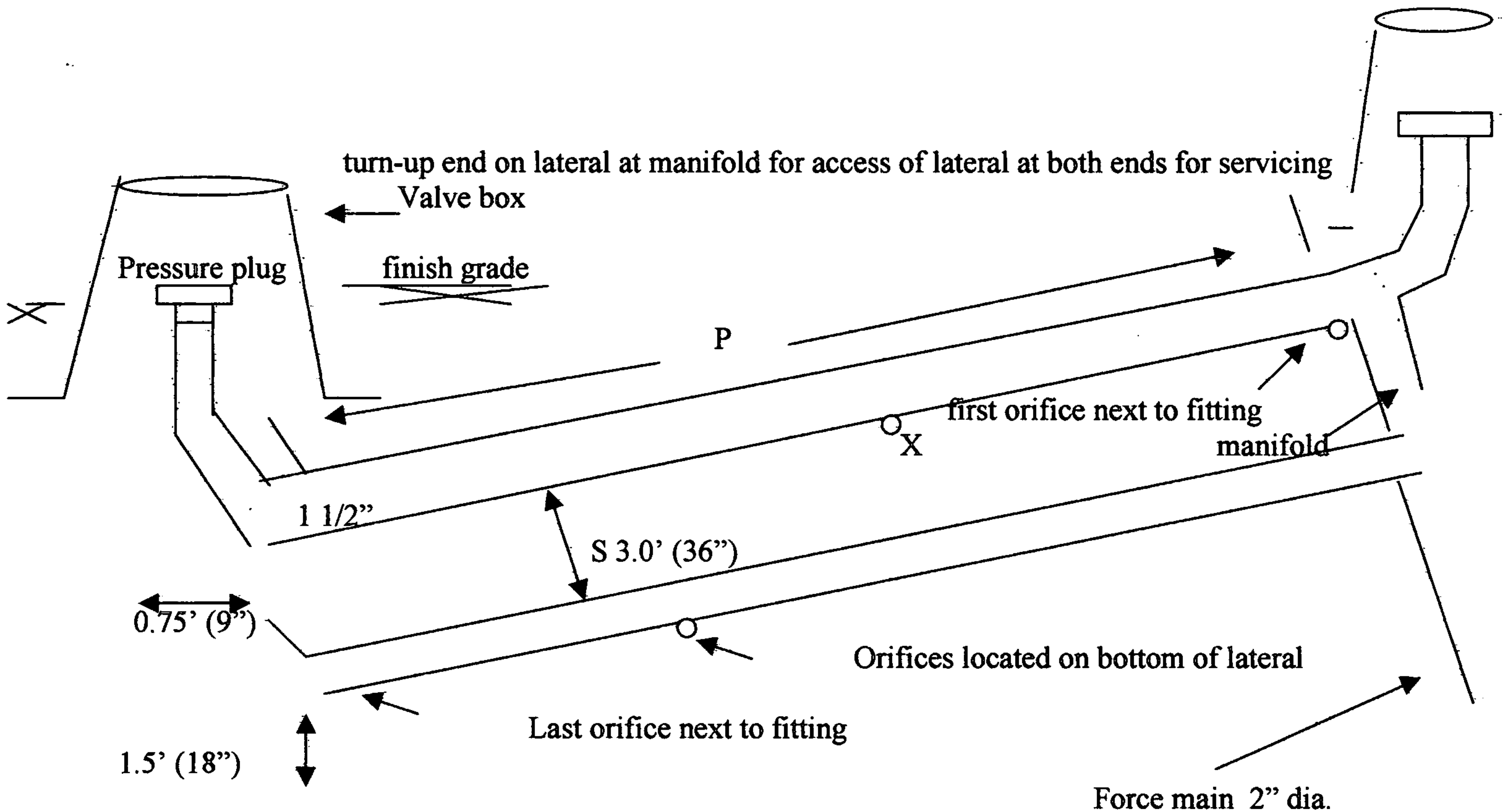
GENERAL INFORMATION New Site

Three bedroom home, 450gal DWF
 10% slope system area
 0.5 soil application rate
 8" limiting soil factor
 1000/600 Wieser tank with Best Filter #GF10
 effluent quality #1

end fed system w/2 laterals
 dispersal cell design loading rate 1.0
 linear rate 6.00
 orifice sq/ft. 5.25

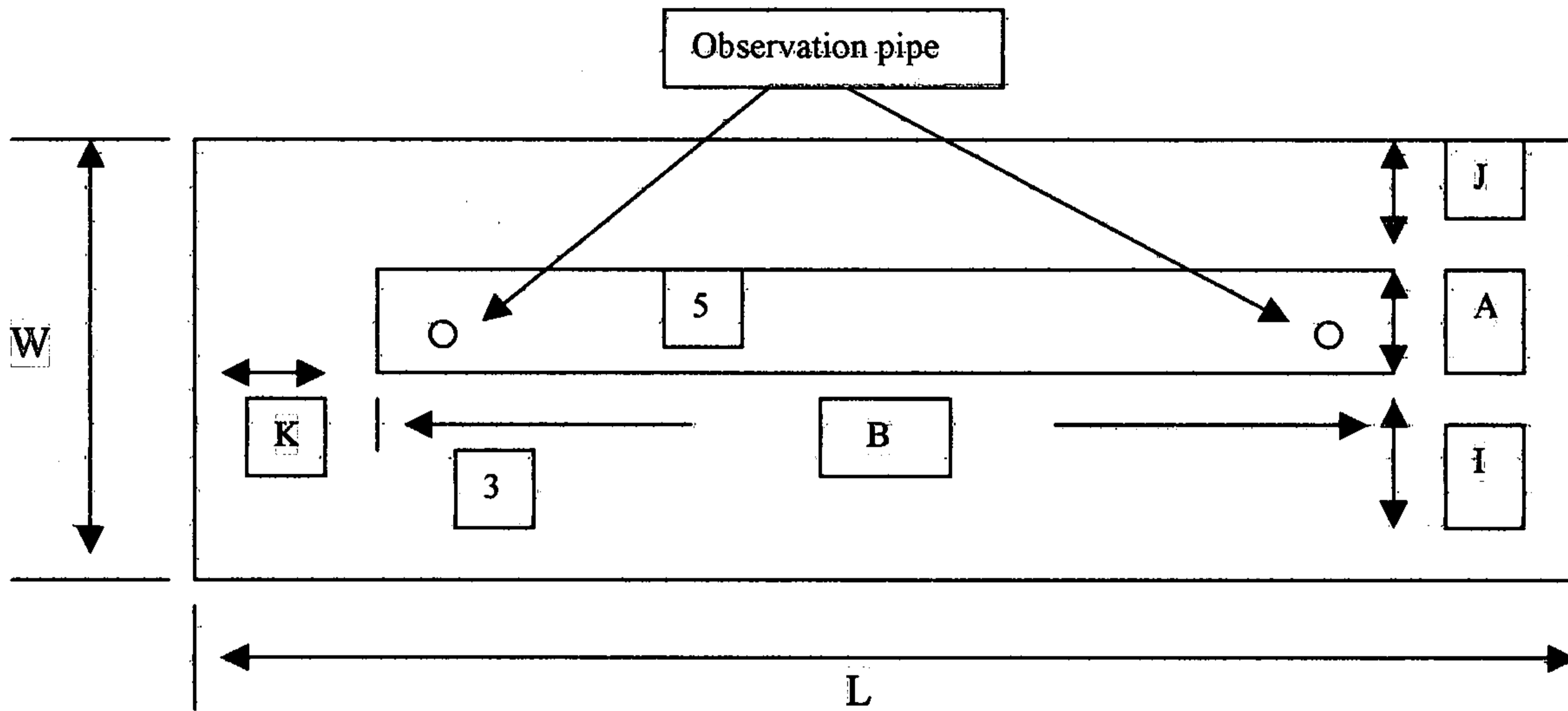
LATERAL LAYOUT DIAGRAM (not to scale) End Fed System

Number of laterals	2	orifice dia.	3/16in. (0.188)
Lateral dia.	1 1/2"	orifice spacing (X)	42in. (3.5')
Lateral length (P)	73.5 ft.	orifice per lateral	22
Lateral spacing (S)	3.0ft.	lateral discharge rate	14.52gpm
Manifold dia.	1 1/2 in	total system rate	29.04gpm
Forcemain dia.	2.0in		

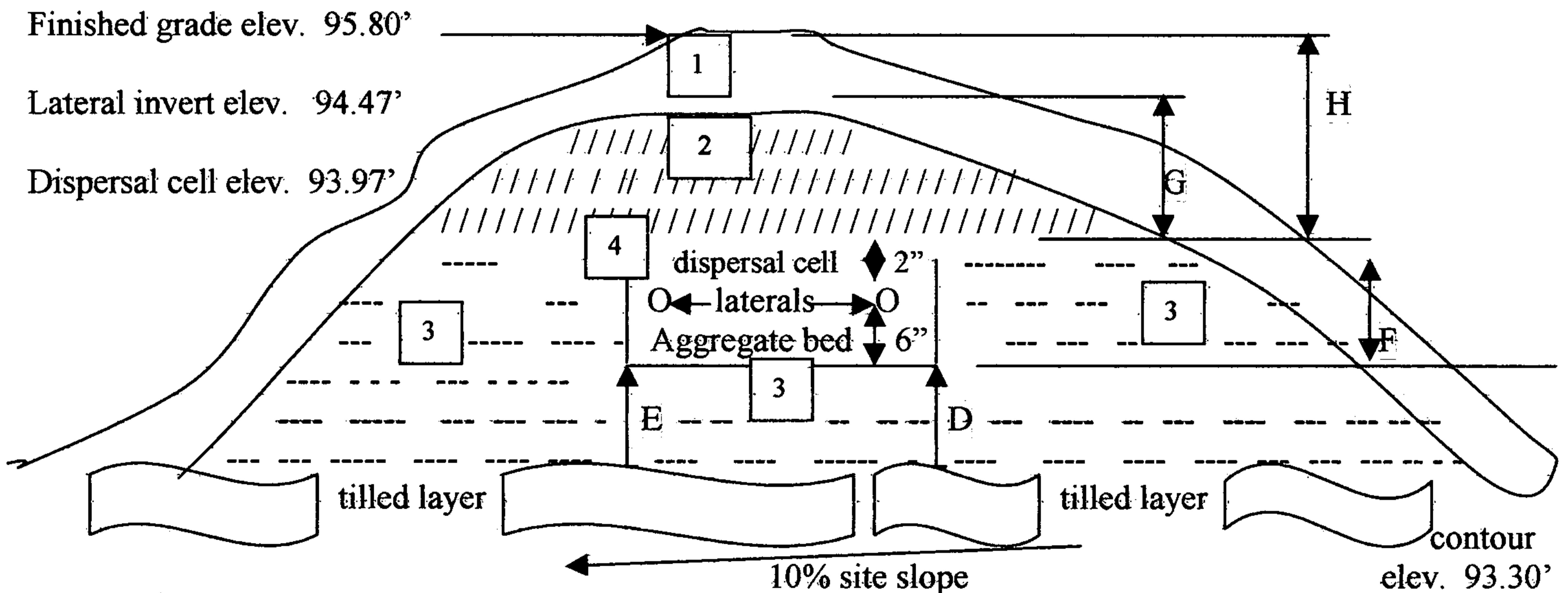


PLAN VIEW OF MOUND (not to scale)

J= 5.0'	D= 0.67' (8")	K= 8.5'	required bed 450sq. ft
A= 6.0'	E= 1.27' (15 1/4")	B= 75.0'	proposed bed 450sq. ft.
I= 11.5'	F= 0.83' (10")	L= 92.0'	required basel area 900sq. ft.
W= 22.5'	G= 0.50' (6")		proposed basel area 1312.5 sq. ft.
	H= 1.00' (12")		observation pipe @ 15ft.

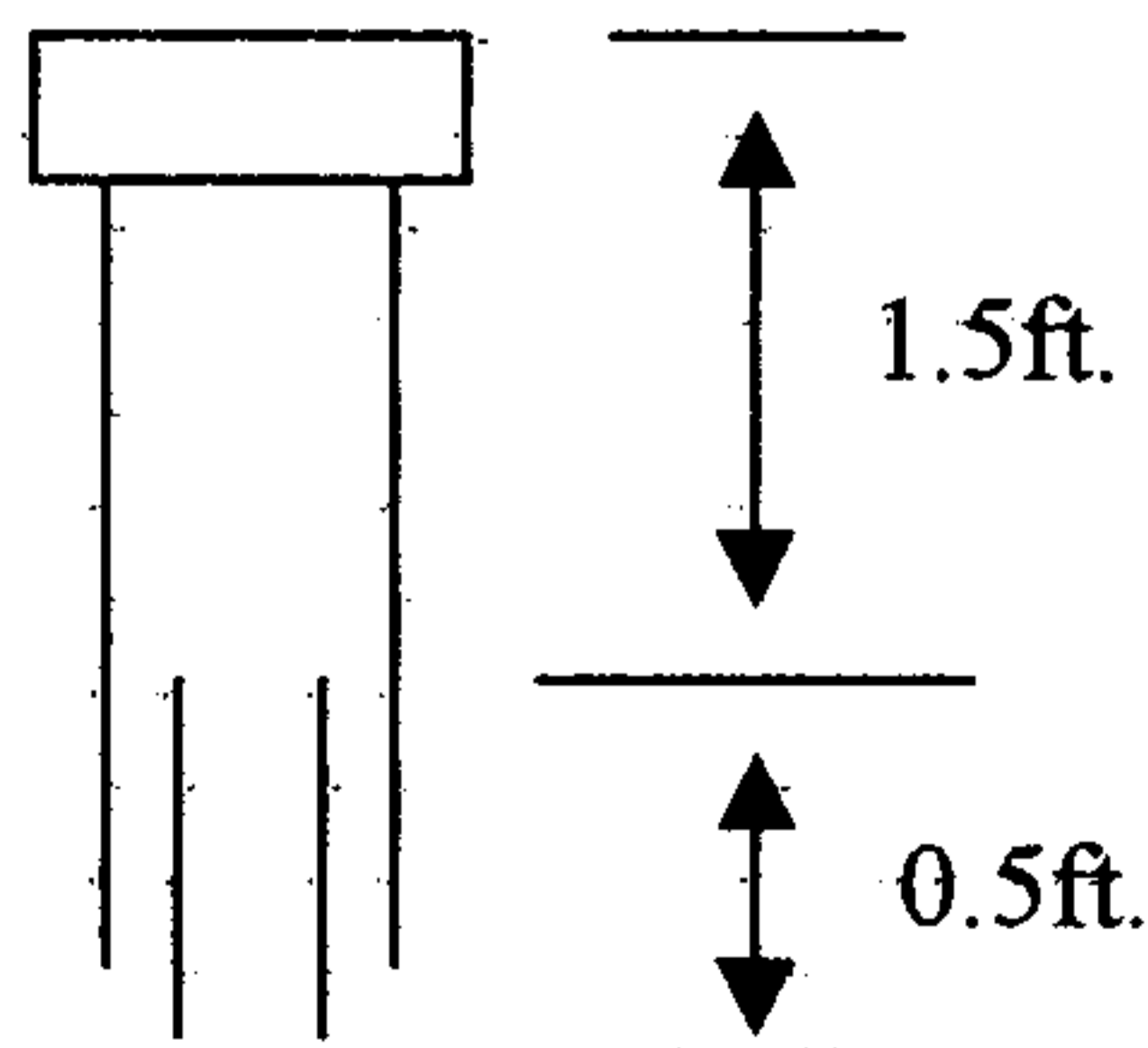


Mound Cross Section View (not to scale)



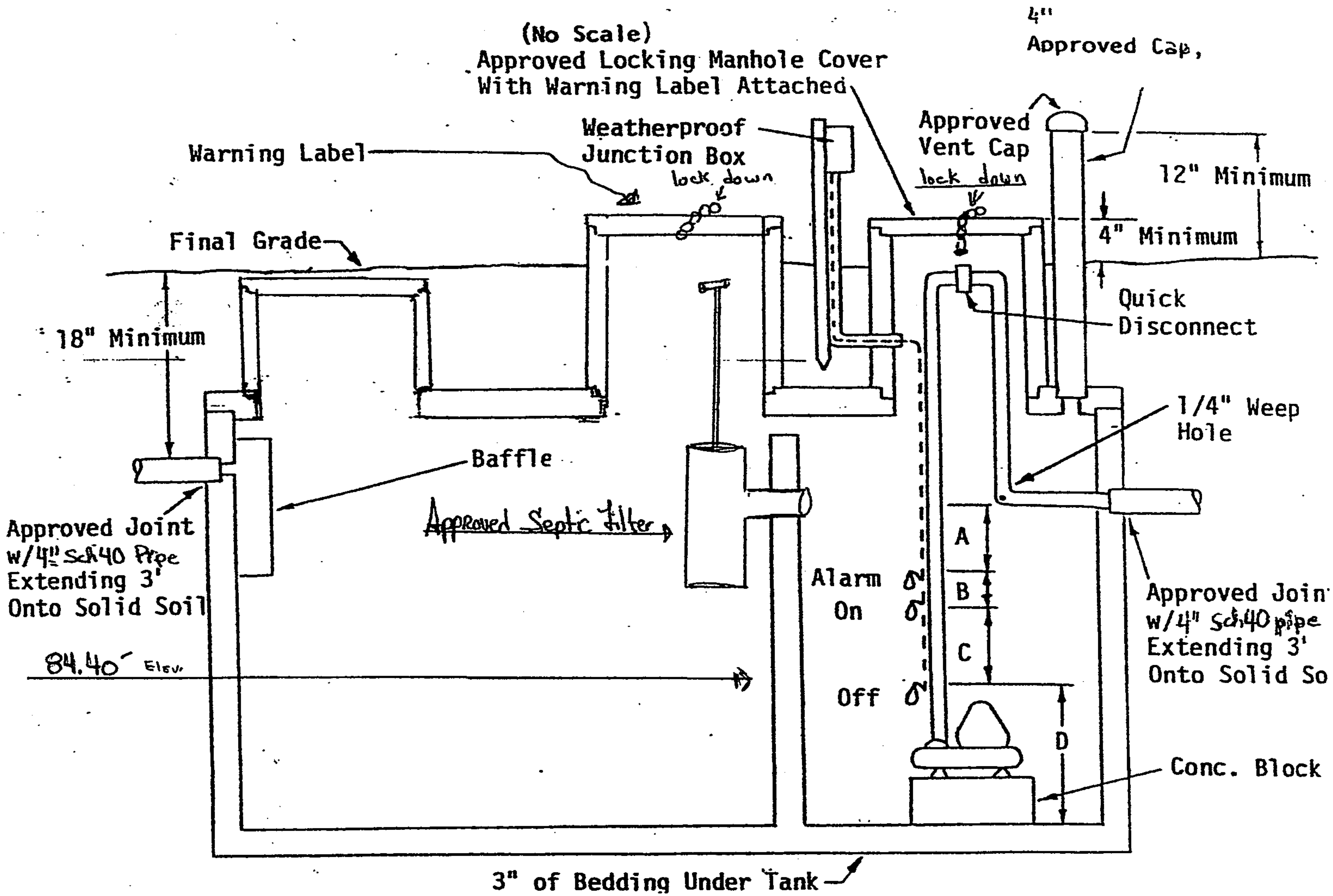
Numeral Key

- 1 topsoil cap
- 2 subsoil cap
- 3 ASTM C33 sand
- 4 synthetic cover over cell
- 5 aggregate



4in. dia. observation pipe
with 1/4in slot

COMBINATION SEPTIC TANK / PUMP CHAMBER



Note: Pump and Alarm Are On Separate Circuits

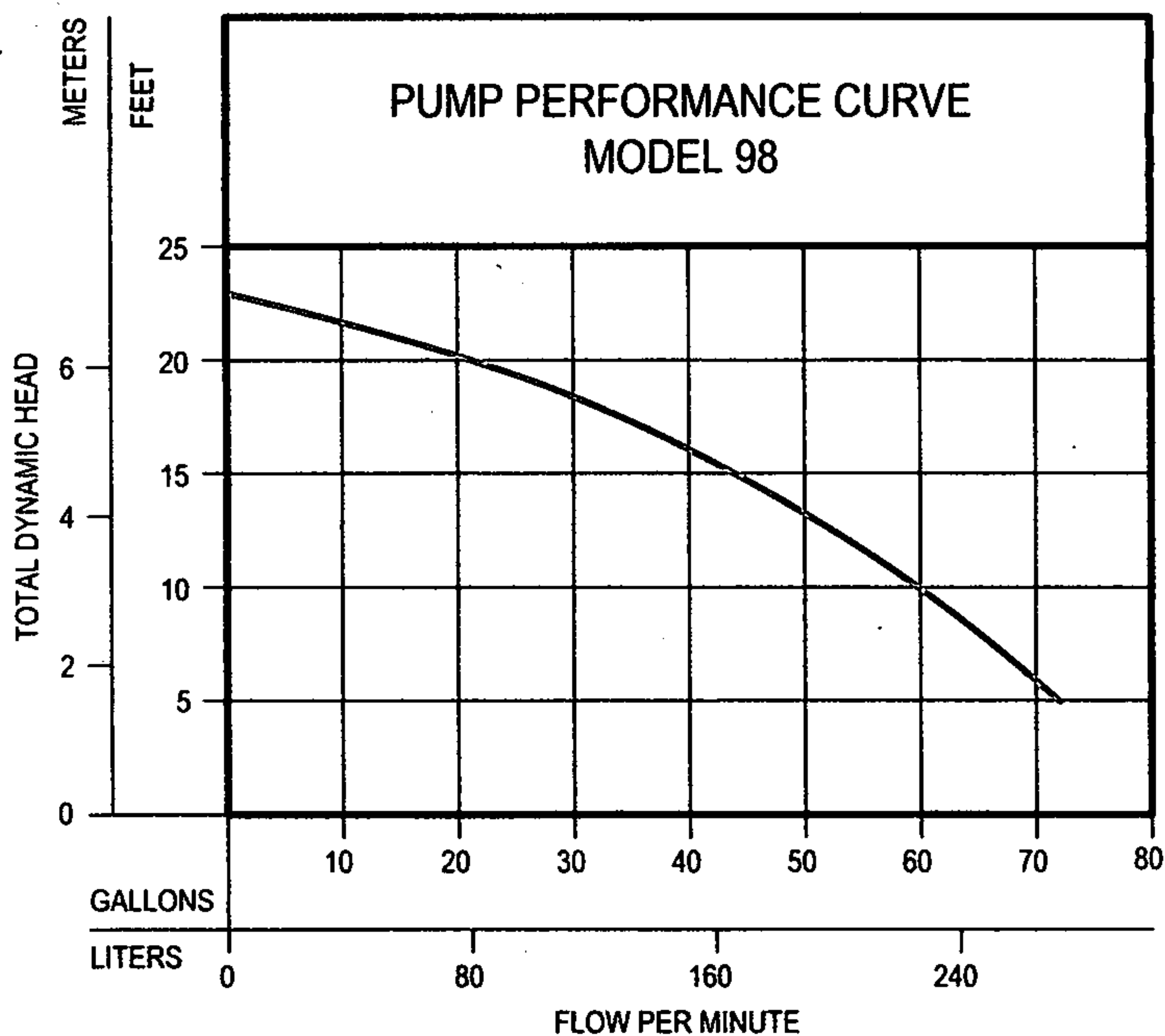
20% DWF	=	90.0 gals
5 times the lateral void	=	67.6 gals
4. M. void	=	13.86
		81.46 gal/min or 103.86

Tank Manufacturer: Wieser Concrete
 Tank Size-Septic/Pump: 1000/600 Gallons
 Alarm Manufacturer: S. J. Electro
 Model Number: S. J.-1
 Switch Type: mechanical
 Pump Manufacturer: Zoeller
 Model Number: #98
 Minimum Discharge Rate: 30 GPM

Capacities: A 19 inches or 318.44 Gallons
 + B 2 inches or 33.52 Gallons
 + C 5 inches or 83.80 Gallons
 + D 10 inches or 167.60 Gallons
 Total..... = 36 inches or 603.36 Gallons

Vertical Difference Between Pump Off and Distribution Pipe: 10.07 Feet
 Minimum Required Supply Pressure: 2.5 * 1.3 + 3.25 Feet
 <u>85</u> Feet of Force Main x 1.94 Friction Factor/100 Feet: + 1.65 Feet
2 Inch Diameter Force Main
 Total Dynamic Head:..... = 14.97 Feet

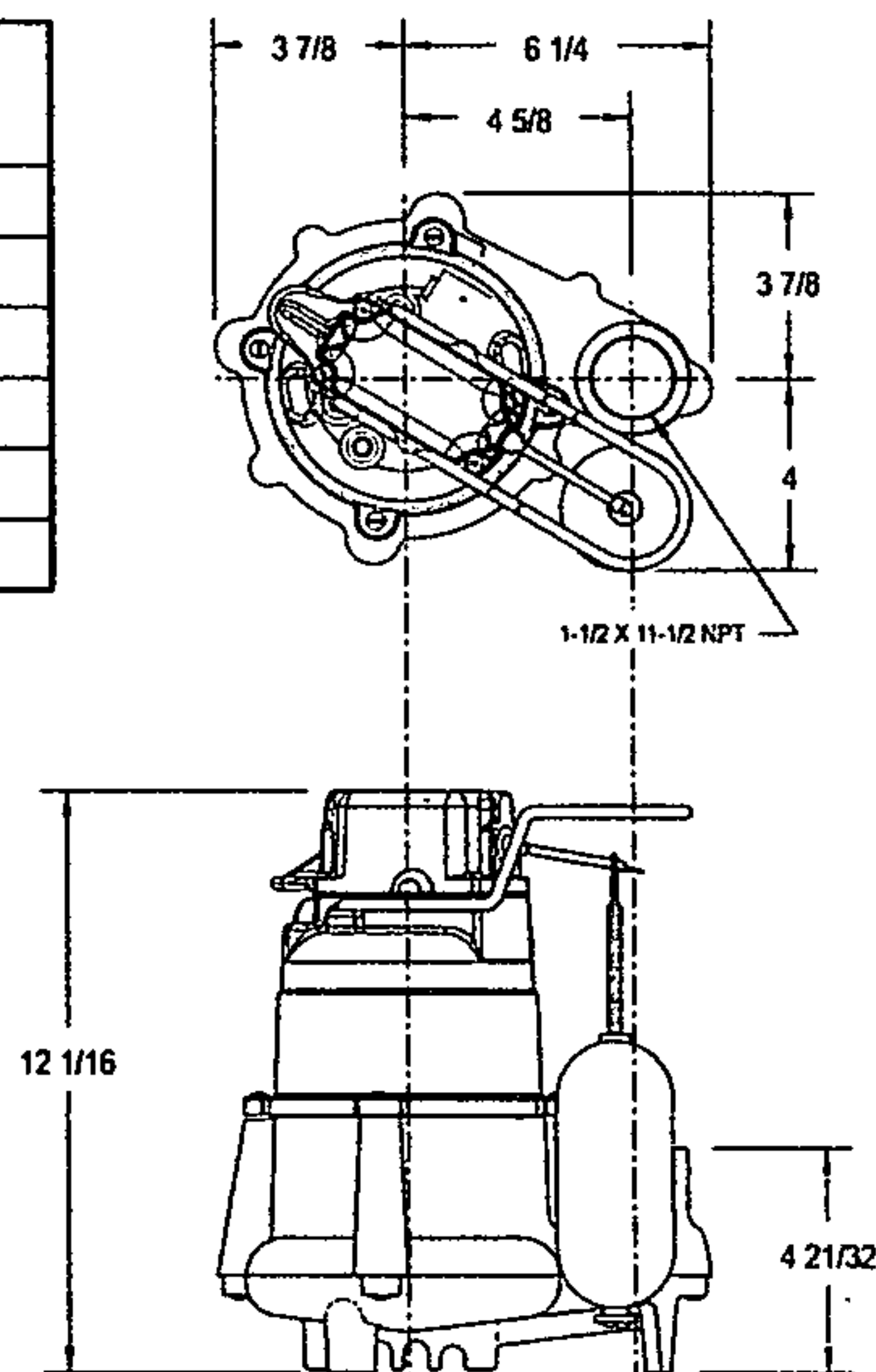
gal/in 16.76



**TOTAL DYNAMIC HEAD/FLOW
PER MINUTE
EFFLUENT AND DEWATERING**

MODEL		98	
Feet	Meters	Gal.	Liters
5	1.5	72	273
10	3.0	61	231
15	4.6	45	170
20	7.1	25	95
Shut-off Head:		23 ft.(7.0m)	

009971



SK1102

CONSULT FACTORY FOR SPECIAL APPLICATIONS

- Electrical alternators, for duplex systems, are available and supplied with an alarm.
- Mechanical alternators, for duplex systems, are available with or without alarm switches.
- Variable level float switches are available for controlling single and three phase systems.
- Double piggyback variable level float switches are available for variable level long cycle controls.
- Refer to FM1922 and FM0806 for temperatures above 130°F.

SELECTION GUIDE

98 Series				Control Selection		
Model	Volts-Ph	Mode	Amps	Simplex	Duplex	
M98	115	1	Auto	9.4	1	4
N98	115	1	Non	9.4	2 or 3	4
D98	230	1	Auto	4.7	1	4
E98	230	1	Non	4.7	2 or 3	4

1. Integral float operated mechanical switch, no external control required.
2. For automatic use single piggyback variable level float switch or double piggyback variable level float switch. Refer to FM0477.
3. See FM1228 for correct model of simplex control panel.
4. See FM0712 for correct model of duplex control panel or FM1663 for a residential alternator system.

For information on additional Zoeller products refer to catalog on Piggyback Variable Level Switches, FM0477; Electrical Alternator, FM0486; Mechanical Alternator, FM0495; Sump/Sewage Basins, FM0487; Single Phase Simplex Pump Control, FM1596; Alarm Systems, FM0732.

CAUTION

All installation 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 Electric Code (NEC) and the Occupational Safety and Health Act (OSHA).

RESERVE POWERED DESIGN

For unusual conditions a reserve safety factor is engineered into the design of every Zoeller pump.



<http://www.zoeller.com>

ZOELLER
PUMP CO.

MAIL TO: P.O. BOX 16347
Louisville, KY 40256-0347
SHIP TO: 3649 Cane Run Road
Louisville, KY 40211-1961
(502) 778-2731 • 1 (800) 928-PUMP
FAX (502) 774-3624

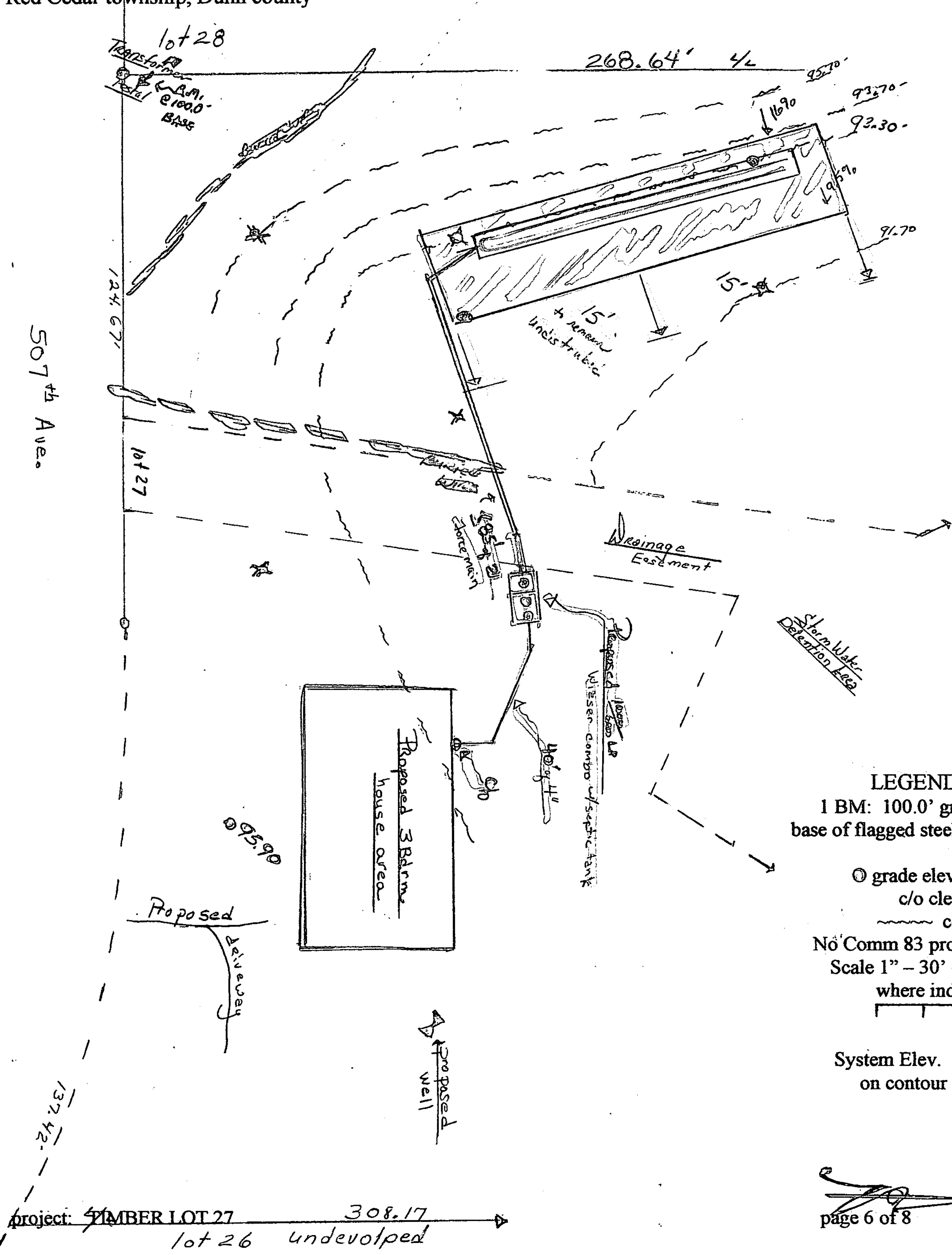
Manufacturers of..

"QUALITY PUMPS SINCE 1939"

page 5 of 8

SITE PLAN

NE,SE,31,28,12W
 Red Cedar township, Dunn county



LEGEND

- 1 BM: 100.0' grade at base of flagged steel stake
- X pits
- grade elevations c/o clean-out
- ~~~~ contour
- No Comm 83 problems
- Scale 1" = 30' except where indicated

System Elev. 93.97'
 on contour 93.30'

Mound System Maintenance and Operation Specifications

Service Provider's Name: Bauer Plumbing LLC

Phone: 715/672-8224

POWTS Regulator's Name: Dunn County Zoning

Phone: 715/231-6520

System Flow and Load Parameters

Design Flow – Peak	450gpd	Maximum Influent Particles Size	1/8in
Estimated Flow – Average	300gpd	Maximum BOD5	220mg/L
Septic tank Capacity	1000gals	Maximum TSS	150mg/L
Soil absorption component Size	450bed	Maximum FOG	30mg/L
Type of Wastewater	Domestic	Maximum Fecal Coliform	>10E4 cfu/100mL

Service Frequency

Septic and Pump Tank -----Inspect and/or service once every 3 years
Effluent Filter-----Should inspect and clean at least once every 3 years
Pump and Controls -----Test once every 3 years
Alarm-----Should test monthly
Pressure System -----Laterals should be flushed and pressure tested every 1.5 years
Mound -----Inspect for ponding and seepage once every 3 years
Other-----Initially filter should be checked yearly to determine service schedule
Avoid surge flows of water; try to spread laundry through out the week
Avoid winter traffic such as sliding or snowmobiling which might lead to mound freeze-up

Miscellaneous Construction and Materials Standards

1. Observation pipes are slotted and materials conform to Table Comm 84.30-1, have a watertight cap and are secured as shown in the mound component manual.
2. Dispersal cell aggregate conforms to Comm 84.30 (6)(I), Wis. Adm. Code.
3. All gravity and pressure piping materials conform to the requirements in Comm 84, Wis. Adm. Code.
4. Tillage of the basal area is accomplished with a chisel plow.
5. The mound structure and other disturbed areas will be seeded and mulched to prevent soil erosion and help reduce frost penetration
6. Lateral Turn-up to finish at grade or above, enclosed in a 6-8" diameter lawn sprinkler valve box or similar product. (lateral turn-up consists of a long sweep 90 or two 45degree bends same diameter as lateral)
7. Lateral Turn-up on end of distribution laterals after the last orifice.
8. Bottom area of mound up to 15ft. must remain undisturbed.

Mound System Management Plan
Pursuant to Comm 83.54, Wis. Adm. Code

General

This system shall be operated in accordance with Comm 82-84 Wis. Adm. Code. And shall maintained in accordance with it's component manuals and local or state rules pertaining to system maintenance and maintenance reporting.

No one should ever enter a septic or pump tank since dangerous gases may be present that could cause death.

Septic and pump tank abandonment shall be in accordance with Comm 83.33, Wis. Adm. Code when the tanks are no longer used as POWTS components.

Septic or pump tank manholes risers, access risers and covers should be inspected for water tightness and soundness. Access openings used for service and assessment shall be sealed watertight upon the completion of service. Any opening deemed unsound, defective, or subject to failure must be replaced. Exposed access openings greater than 8" in diameter shall be secured by an effective locking device to prevent accidental or unauthorized entry into a tank or component.

Septic Tank

The septic tank shall be maintained by an individual certified to service septic tanks under s.281.48, Stats. The contents of the septic tank shall be disposed of in accordance with NR 113, Wis Adm. Code. The operating condition of the septic tank and outlet filter shall be assessed at least once every 3 years by inspection.

The outlet filter shall be cleaned as necessary to ensure proper operation. The filter cartridge should not be removed unless provisions are made to retain solids in the tank that may slip off the filter when removed from its enclosure. If the filter is equipped with an alarm, the filter shall be serviced if the alarm is activated continuously.

The septic tank shall have its contents removed when the volume of sludge and scum in the tank exceeds 1/3 the liquid volume of the tank. If the contents of the tank are not removed at the time of a triennial assessment, maintenance personal shall advise the owner of when the next service needs to be done to maintain less than maximum scum and sludge accumulation in the tank.

Pump Tank

The pump (dosing) tank shall be inspected at least once every 3 years. All switches, alarms and pumps shall be tested to verify proper operation. If an effluent filter is installed within the tank it shall be inspected and serviced as necessary.

Mound and Pressure Distribution System

No trees or shrubs should be planted on the mound. Plantings maybe made around the mound's perimeter and the mound shall be seeded and mulched as necessary to prevent erosion and to provide some protection from frost penetration.

Traffic (other than for vegetative maintenance) on the mound is not recommended since soil compaction may hinder aeration of the surface within the mound and snow compaction in the winter will promote frost penetration.

Cold weather installations dictate that the mound be heavily mulched as protection from freezing.

Influent flow may not exceed maximum design flow specified in the permit for this installation.

The pressure distribution system is provided with a flushing point at the end of each lateral and it is recommended that each lateral be flushed at least once every 18months. When a pressure test is performed is should be compared to the initial test when the system was installed to determine if orifice clogging has occurred, if clogging has occurred orifice cleaning is required to maintain equal distribution within the cell.

Observation pipes within the dispersal cell shall be checked for effluent ponding. Ponding levels shall be reported to the owner and any levels above 6" considered impending failure requiring additional, more frequent monitoring.

Contingency Plan

If the septic tank or any of its components become defective the tank or components shall be repaired or replaced to keep the system in proper operating condition.

If the dosing tank or its components become defective the defective components(s) shall be immediately repaired or replaced with a component of same or equal performance.

If the mound fails to accept wastewater or discharges wastewater to the ground surface, it will be repaired or replaced. Increasing basal area if toe leakage or by removing biologically clogged absorption and dispersal media and related piping and replacing components as deemed necessary to bring the system into proper operating condition.

See page 7 of this plan for the name and telephone number of your local POWTS regulator and service provider.

in accordance with Comm 85, Wis. Adm. Code

Attach complete site plan on paper not less than 8 1/2 x 11 inches in size. Plan must include, but not limited to, vertical and horizontal reference point (BM), direction and percent slope, scale of dimensions, north arrow, and location and distance to nearest road.

Please print all information.

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

County	Dunn
Parcel I.D.	
Reviewed by	Date

Property Owner Timber Ridge Homes (Jamie Winsand)	Property Location Govt. Lot NE 1/4 SE 1/4 S 31 T 28 N R 12 (or) (W)
Property Owner's Mailing Address N 5049 553 rd St.	Lot # 27 Block # 4 Subd. Name or CSM# Timber Ridge
City Menomonee WI Zip Code 54751 Phone Number (715) 505/0782	City <input type="checkbox"/> Village <input type="checkbox"/> Town <input checked="" type="checkbox"/> Nearest Road Red Cedar 507 th Ave.

New Construction Use: Residential / Number of bedrooms 3 Code derived design flow rate 450 GPD
 Replacement Public or commercial - Describe: +

Parent material loess over out washes Flood Plain elevation if applicable + ft.

General comments and recommendations: Recommend a mound system w/ 0.67' (8") sand lift; 0.5 soil application rate on contour 93.30'
soil test taken on a bright sunny day, 32°

1 Boring # Boring Pit Ground surface elev. 91.70 ft. Depth to limiting factor 28 in.

Horizon	Depth in.	Dominant Color Munsell	Redox Description Qu. Sz. Cont. Color	Texture	Structure Gr. Sz. Sh.	Consistence	Boundary	Roots	Soil Application Rate GPD/ft ²	
									*Eff#1	*Eff#2
1.	0-9	10 YR 3/3		sil	2, m, abk	mfr	gs	3f	0.6	0.8
2.	9-28	7.5 YR 4/6		fs	0, sg	mfr	gs	lf	0.5	1.0
3.	28-34	7.5 YR 4/6	f1f 7.5 YR 4/6 + 5/8	f, s.	0, sg	mfr	g, w	lvf	0.5	1.0
4.	34-52	10 YR 4/3	f1f 7.5 YR 4/6 + 5/8	sil	2, f, abk	mfr	+	+	0.4 ^c	0.6

2. Boring # Boring Pit Ground surface elev. 92.70 ft. Depth to limiting factor > 48 in.

Horizon	Depth in.	Dominant Color Munsell	Redox Description Qu. Sz. Cont. Color	Texture	Structure Gr. Sz. Sh.	Consistence	Boundary	Roots	Soil Application Rate GPD/ft ²	
									*Eff#1	*Eff#2
1.	0-10	10 YR 3/6		l, fs	0, sg	mfr	gs	2f	0.5	1.0
2.	10-31	10 YR 4/6		f, s	0, sg	mfr	gs	lf	0.5	1.0
3.	31-48	10 YR 5/4		f, s	0, sg	mfr	+	+	0.5	1.0
<u>starting @ 30", 2" in depth non-continuous bands of 7.5 YR 3/4 fine sand</u>										

* Effluent #1 = BOD₅ > 30 ≤ 220 mg/L and TSS > 30 ≤ 150 mg/L * Effluent #2 = BOD₅ ≤ 30 mg/L and TSS ≤ 30 mg/L

CST Name (Please Print) Ms. Loretta Larrabee	Signature <i>Loretta Larrabee</i>	CST Number CSTM224580
Address N2089 Cty. Trk. Y, Menomonee, WI 54751	Date Evaluation Conducted March 10 th , 2008	Telephone Number 715/664-8184

Property Owner Timber Ridge Homes

Parcel ID # _____

Page 2 of 3

3. Boring # Boring Pit Ground surface elev. 95.70 ft. Depth to limiting factor 43 in.

Horizon	Depth in.	Dominant Color Munsell	Redox Description Qu. Sz. Cont. Color	Texture	Structure Gr. Sz. Sh.	Consistence	Boundary	Roots	Soil Application Rate	
									GPD/ft ²	
									*Eff#1	*Eff#2
1.	0-8	10YR 3/3		l, s	Ø, sq	mfr	g, s	2f	Ø.7	1.6
2.	8-23	10YR 4/6		l, s	Ø, sq	mfr	g, w	2f	Ø.7	1.6
3.	23-30	10YR 4/4		sil	2, m, abk	mfr	g, s	1f	Ø.6	Ø.8
4.	30-41	10YR 4/6		sil	2, m, abk	mfr	g, w	1f	Ø.6	Ø.8
5.	41-43	10YR 5/6		fs	Ø, sq	mfr	g, s	1f	Ø.5	1.Ø
6.	43-52	10YR 5/6	f1f 7.5YR 6/0 + 5/8	fs	Ø, sq	mfr-mfr	+	+	Ø.5	1.Ø
starting @ 43' 4" in depth continuous restrictive bands of 7.5YR 3/4 fine sand										

4. Boring # Boring Pit Ground surface elev. 94.70 ft. Depth to limiting factor 22 in.

Horizon	Depth in.	Dominant Color Munsell	Redox Description Qu. Sz. Cont. Color	Texture	Structure Gr. Sz. Sh.	Consistence	Boundary	Roots	Soil Application Rate	
									GPD/ft ²	
									*Eff#1	*Eff#2
1.	0-7	10YR 3/3		l, fs	Ø, sq	mfr	g, s	2f	Ø.5	1.Ø
2.	7-22	10YR 4/4		fs	Ø, sq	mfr	g, s	1f	Ø.5	1.Ø
3.	22-60	10YR 4/4	f2d 7.5YR 6/0 + 5/8	fs	Ø, sq	mfr	+	+	Ø.5	1.Ø
w/ bands of 6" in depth of 7.5YR 3/4 fine sand starting @ 40" sand stone fragments										
Ø-6" frozen soil										

5. Boring # Boring Pit Ground surface elev. 93.30 ft. Depth to limiting factor 42 in.

Horizon	Depth in.	Dominant Color Munsell	Redox Description Qu. Sz. Cont. Color	Texture	Structure Gr. Sz. Sh.	Consistence	Boundary	Roots	Soil Application Rate	
									GPD/ft ²	
									*Eff#1	*Eff#2
1.	0-12	10YR 3/3		sil	2, m, abk	mfr	g, s	2f.	Ø.6	Ø.8
2.	12-19	10YR 4/6		sil	2, m, abk	mfr	g, s	1f	Ø.6	Ø.8
3.	19-42	10YR 4/6		sil	2, f, abk	mfr	g, s	1f	Ø.4	Ø.6
4.	42-48	10YR 4/6	f2d 7.5YR 6/0 + 5/8	sil	1, f, sbk	mfr-mfr	+	+	Ø.4	Ø.6

* Effluent #1 = BOD₅ > 30 ≤ 220 mg/L and TSS > 30 ≤ 150 mg/L

* Effluent #2 = BOD₅ ≤ 30 mg/L and TSS ≤ 30 mg/L

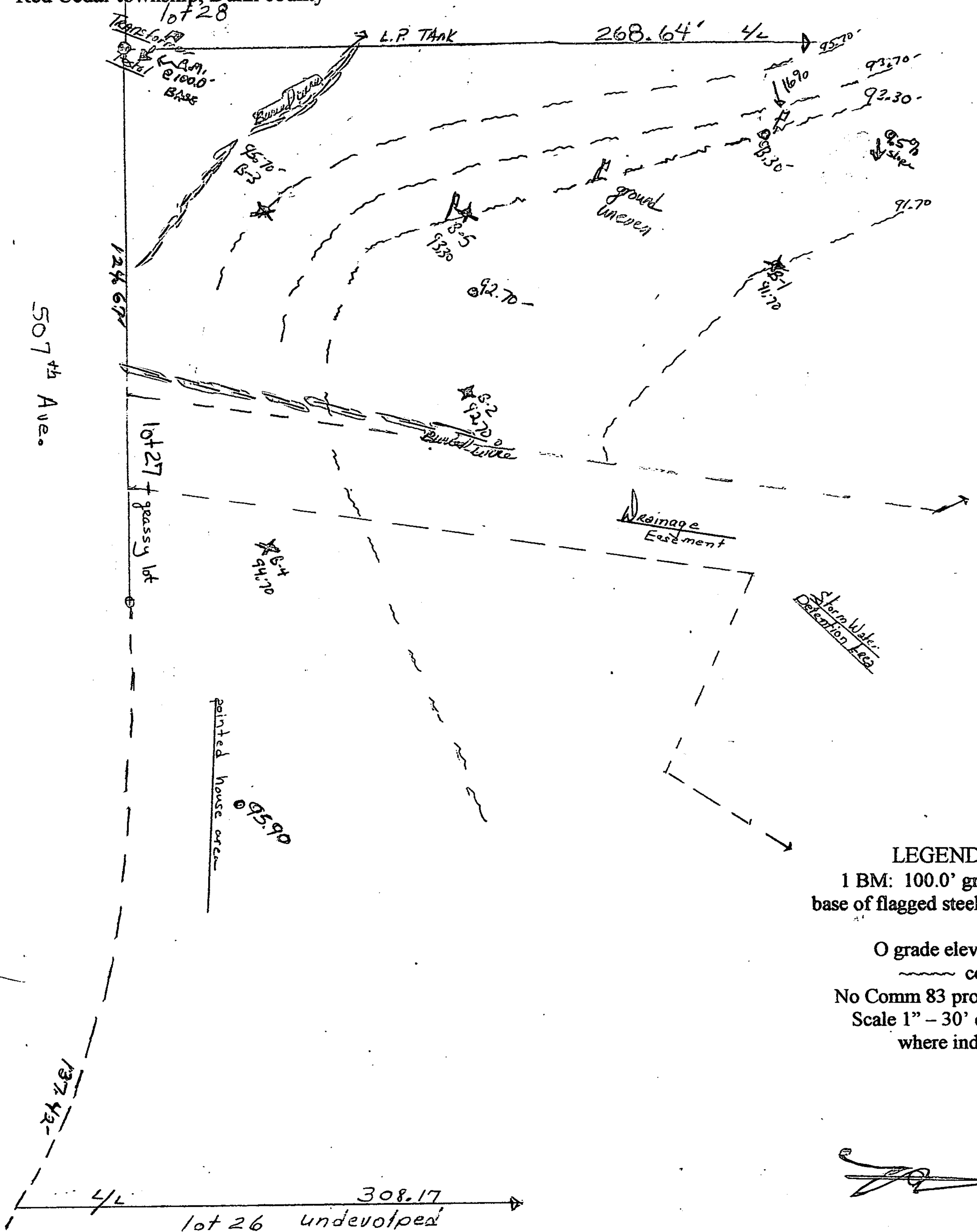
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SOIL EVALUATION REPORT

Timber Ridge Homes
NE, SE, 31, 28, 12W
Red Cedar township, Dunn county

ORIGINAL

5/24/13
S. J. Stiles



LEGEND

- 1 BM: 100.0' grade at base of flagged steel stake
- X pits
- O grade elevations
- ~~~~ contour
- No Comm 83 problems
- Scale 1" - 30' except where indicated

SOUTHEAST 1/4
EAST 1/4,
2 WEST,
NSIN

RECORDED: VOLUME B PLATS PAGE 73

James M. Mrdutt
JAMES M. MRDUTT, REG. OF DEEDS, DUNN CO. WI

UNPLATTED LANDS OWNED BY OTHERS

EAST 1/4 COR.
SECTION 31, T28N, R12W
FOUND ALUM. MON.

