

Sanitary Final Inspection Report



Zoning, Planning & POWTS Department
307 Main Street, Suite B03, Black River Falls WI 54615
Ph: 715.284.0220 * Fax: 715.284.0220
www.co.jackson.wi.us

Sanitary Permit:

Permit Number: 2713017

Permit Information:

Report #: 138 Issued Date: 6/6/2013 Inspection Date: 6/20/2013

Authorization Name: Dustin McCune

Authorization Title: Zoning Technician and Sanitarian

File #: 02-22-05-19-41

Inspection Information:

State Plan ID #: 2155905 CST BM Elev: 100.00 Insp BM Elev: 100.00

BM Desc:

bottom of house siding

Parcel Information:

Parcel #: 02402920000

Owner Name: SEDELBAUER, KIDD & ARMITAGE LLC

Phone: --

Mailing Address: 1100 E TAFT ST
BLAIR, WI 54616-9368

Cell Phone: --

Property Address: W14207 HOLMES RD

Plat Description: NOT AVAILABLE

CSM: 0

Lot:

Block:

Section: 19

Township: T22N

Range: R5W

Twp/City: TOWN OF HIXTON

Qtr Qtr: NE SE

Acres: 40.00

Legal Description:

NE SE

Tank Information #1:**Tank:**

New/Existing	Age	Manufacturer:	Material:	Compartments	Type	Gallons
New Tank		Al's Concrete	Prefab Concrete	Double	Septic	1000.00
					Pump	600.00

Filter:

Manufacturer: Polylok

Model Number: PL-525

Pump/Siphon:

Manufacturer: Goulds	Model Number: EPO5	Demand GPM: 49.50
TDH Lift: 9.00	Friction Loss: 1.50	System Head: 3.30
TDH: 13.80	Forcemain Length: 30	Forcemain Diameter: 2

Elevation:

Station	BS	HI	FS	ELEV
Benchmark	5.20	105.20		100.00
Alt. Benchmark			6.55	98.64
Alt. Bench. Comment	top of manhole cover over inlet			
Building Sewer				
Tank Inlet			11.00	94.20
Tank Outlet			11.40	93.80
Pump Tank In				
Pump Tank Out				
Pump Pad			14.20	91.00
Header "T"				
Bottom Cell #1			5.70	99.50
Pipe Cell #1				
Bottom Cell #2				
Pipe Cell #2				
Bottom Cell #3				
Pipe Cell #3				
Original C/L			6.20	99.00
Top of Well				
Final Grade				
Latitude	44 Deg	22 Min	16.98 Sec	
Longitude	91 Deg	1 Min	33.72 Sec	
out riser			9.55	95.65

Tank Information #1 (cont):

Soil Absorption System:

Cell Dimensions

Width: 9.00 Length: 50.00

Width: Length:

Width: Length:

Width: Length:

Width: Length:

Setback Information

System To	P/L	Building	Well	Lake/Stream
Mound	>40'	>20'	>100'	>200'

Leaching Chamber or Unit

Manufacturer: Model Number:

Distribution System:

Header/Manifold

Length: 6.00 Diameter: 1.50

Distribution Pipe(s)

Length: 48.00 Diameter: 1.50 Spacing: 3.00

x Hole Size 0.1880 x Hole Spacing 24.0000

Soil Cover:

☒ Required to complete Soil Cover (≥ 12 inches)

Tank Setback Information:**Tank Setback #1**

Distance From:	Septic Tank	Dosing	Aeration	Holding
Well	>100'	>100'		
Adjacent Well	>200'	>200'		
Foundation	7'	7'		
Property Line	>40'	>40'		
Navigable Water	>200'	>200'		

Tank Setback #2

Distance From:	Septic Tank	Dosing	Aeration	Holding
Well				
Adjacent Well				
Foundation				
Property Line				
Navigable Water				

Tank Setback #3

Distance From:	Septic Tank	Dosing	Aeration	Holding
Well				
Adjacent Well				
Foundation				
Property Line				
Navigable Water				

Additional Notes:

When I got out there they had the tank set and the building sewer connected to it. They had the forcemain in and the mound was up to grade and they were starting to put the EZ Flow bundles on. I got all the shots I needed and measured everything up. They were putting the laterals in the bundles when I left and backfilling the tank and building sewer.

Person(s) present during inspection

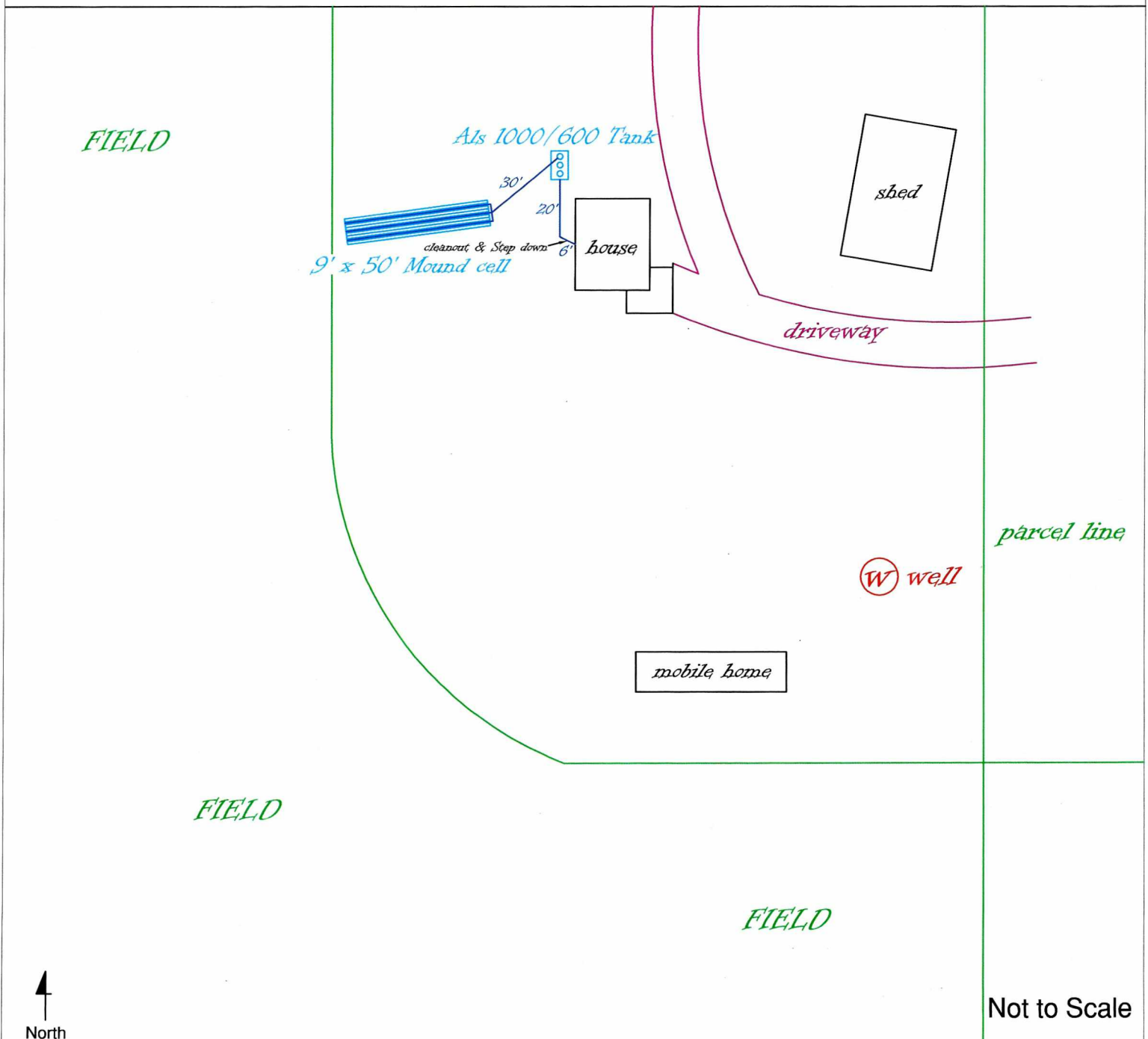
Ivan	Josh	Matt
		☐ Plan revision required

Date:	Inspector's Signature	Cert No.
06/20/13	<i>Buster McLean</i>	1046348

JACKSON COUNTY PRIVATE SEWAGE SYSTEM INSPECTION SKETCH

Onsite Date: 06/20/13 Inspector: Dustin McCune Owner: Trinity Farms
Plumber: Ivan Semington Permit Number: 2713017 Type of POWTS System: Mound
NE 1/4 SE 1/4 Sec. 19 T 22 N, R 05 or (W) Township: Hixton Blk: —
Parcel Number: 024-0292.0000 Subdivision: — Lot #: — CSM #: —

Holmes Road





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

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

2713017

State Transaction Number

2155905

Project Address (if different than mailing address)

W14207 Holmes Rd

Parcel #

024-0292.0000
024-0305-0000

Property Location

Govt Lot

NE SE 19
1/4 SW 1/4 Section 20
(circle one)
T 22 N; R 5 E or W

Subdivision Name

☐ City of

☐ Village of

☒ Town of Hixton

Sanitary Permit Application

In accordance with SPS 383.21(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 Safety and Professional Services. Personal information you provide may be used for secondary purposes in accordance with the Privacy Law, s. 15.04(1)(m), Stats.

I. Application Information - Please Print All Information

Property Owner's Name

TRINITY FARMS % TRAVIS ARMITAGE

Property Owner's Mailing Address

1100 E. TAFT ST.

City, State

BLAIR WI.

Zip Code

54616

Phone Number

608-797-1688

II. Type of Building (check all that apply)

☒ 1 or 2 Family Dwelling - Number of Bedrooms 3

☐ Public/Commercial - Describe Use _____

☐ State Owned - Describe Use _____

Lot #

Block #

CSM Number

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 (explain)

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/Component/Device: (Check all that apply)

☐ Non-Pressurized In-Ground ☐ Pressurized In-Ground ☐ At-Grade ☒ Mound $\geq$ 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) 450 Design Soil Application Rate(gpdsf) 1.0 Dispersal Area Required (sf) 450 Dispersal Area Proposed (sf) 450 System Elevation 99.5

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	<u>1000</u>	<u>-</u>	<u>1000</u>	<u>1</u>	<u>AL'S CONCRETE</u>	☒				
Dosing Chamber	<u>600</u>	<u>-</u>	<u>600</u>	<u>1</u>	<u>" "</u>	☒				

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

Plumber's Name (Print) TUAN SEMINGSON Plumber's Signature TUAN SEMINGSON MP/MPRS Number 232283 Business Phone Number 715-983-5571

Plumber's Address (Street, City, State, Zip Code)

P.O. Box 298 Pigeon Falls WI. 54760

VIII. County/Department Use Only

☒ Approved ☐ Disapproved ☐ Owner Given Reason for Denial Permit Fee \$ 400 Date Issued 06/06/13 Issuing Agent Signature Dwight McGinn

IX. Conditions of Approval/Reasons for Disapproval

1. All setbacks must be met.
2. Existing septic system must be properly abandoned.
3. Mound must be seeded & mulched to prevent erosion.
4. System Elevation 99.5 Lateral Elevation 100.0
5. Pump must be EPDS.

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



Safety and Buildings
141 NW BARSTOW ST FL 4TH
WAUKESHA WI 53188-3789
Contact Through Relay
www.dps.wi.gov/sb/
www.wisconsin.gov

Scott Walker, Governor
Dave Ross, Secretary

October 09, 2012

CUST ID No. 224736

ATTN: POWTS Inspector

MARK H PALMER
PALMER SOIL TESTING & CONSULTING
N27128 LINDSTROM RD
BLAIR WI 54616

ENVIRONMENTAL HEALTH AND ZONING
JACKSON COUNTY SPIA
307 MAIN ST, SUITE B03
BLACK RIVER FALLS WI 54615

CONDITIONAL APPROVAL
PLAN APPROVAL EXPIRES: 10/09/2014

SITE:

Travis Armitage
W14207 Holmes Rd
Town of Hixton
Jackson County
NW1/4, SW1/4, S20, T22N, R5W

Identification Numbers
Transaction ID No. 2155905
Site ID No. 784596
Please refer to both identification numbers, above, in all correspondence with the agency.

FOR:

Description: Mound, 3 bedroom
Object Type: POWTS Component Manual Regulated Object ID No.: 1394591
Maintenance required; Replacement system; 450 GPD Flow rate; 30 in Soil minimum depth to limiting factor from original grade; System(s): 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); Effluent Filter

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.

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

This system is to be constructed and located in accordance with the enclosed approved plans and with the "Mound Component Manual for Private Onsite Wastewater Systems VERSION 2.0" SBD-10691-P (N.01/01) and the "Pressure Distribution Component Manual for Private Onsite Wastewater Treatment Systems VERSION 2.0" SBD-10706-P (N.01/01).

The building sewer and distribution network piping shall be of material listed in Table 384.30-3 and 384.30-5, Wis. Adm. Code.

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 comply with the operation, maintenance and monitoring duties as described in section VIII of the mound component manual. A copy of this information must be given to the owner upon completion of the project.

All holding/treatment tanks are to comply with SPS 384.25(7)(a).

Maintenance information must be given to the owner of the tank explaining that periodic cleaning of the filter is required. Access to the filter for cleaning must be provided per SPS 384 product approval conditions.

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 private sewage system 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. Stats.

Owner Responsibilities:

- **SPS 383.52** 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. **SPS 383.54(1)**.
- **SPS 383.52(2)** A POWTS that is not maintained in accordance with the approved management plan or as required under s. **SPS 383.54(4)** shall be considered a human health hazard.
- **SPS 383.55** 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.

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.

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 and the POWTS management plan to the owner and any others who are responsible for the installation, operation or maintenance of the POWTS.

Sincerely,



Julia Lewis-Osborne
POWTS Reviewer 2, Integrated Services
(262) 397-6005, Fax: (608) 283-7481
julia.lewis@wisconsin.gov

Fee Required \$	250.00
Fee Received \$	250.00
Balance Due \$	0.00

WiSMART code: 7633

cc: Ivan C Semingson, Semingson Plumbing and Pumps LLC (Plans Mailed To)

Note: Effective January 1, 2012, all codes under the jurisdiction of the Division of Safety & Buildings will be modified. Code references with prefixes starting with "Comm" will be replaced with "SPS" to recognize the relocation of the Division of Safety & Buildings from the former Dept. of Commerce to the Dept. of Safety & Professional Services. Additionally, all S&B codes will be renumbered and addressed in a "300" series. For future reference, the Wisconsin Commercial Building Code will be addressed by SPS Chapters 360-366.

EZ FLOW MOUND COVER SHEET

SYSTEM IS TO COMPLY WITH PROVISIONS OF:
EZ Flow Mound Component Manual (8-20-07) & SBD10706-P(N01/01) (Version 2.0)
Pressure Distribution Component Manual

RECEIVED

SEP 27 2012

LOCATION: ~~NW~~ ^{NE} 1/4 ~~SW~~ ^{SE} 1/4 S ~~20~~ ¹⁹ T 22 N R 5 W

SAFETY & BUILDINGS

TOWN: HIXTON COUNTY: JACKSON

OWNER: NAME/ADDRESS:

TRINITY FARMS % TRAVIS ARMITAGE

1100 E. TAFT ST.

BLAIR WI 54616

DESIGNER: NAME/ADDRESS:

MARK PALMER

N27128 LINDSTROM ROAD

LICENSE #1508-007

BLAIR, WI 54616

SIGNATURE: [Signature]

DATE: SEPT 24 2012

ATTACHMENTS:

PAGE 1: PLOT PLAN

PAGE 2: PLAN VIEW CROSS SECTION

PAGE 3: PIPE LATERAL LAYOUT

PAGE 4: TANK SPECIFICATIONS

PAGE 5: ☒ PUMP CURVE ☐ SIPHON SPECIFICATIONS

PAGE 6: OWNER'S MANUAL

&
MANAGEMENT PLAN



RECEIVED
SAFETY & BUILDINGS
CONDOMINIUM

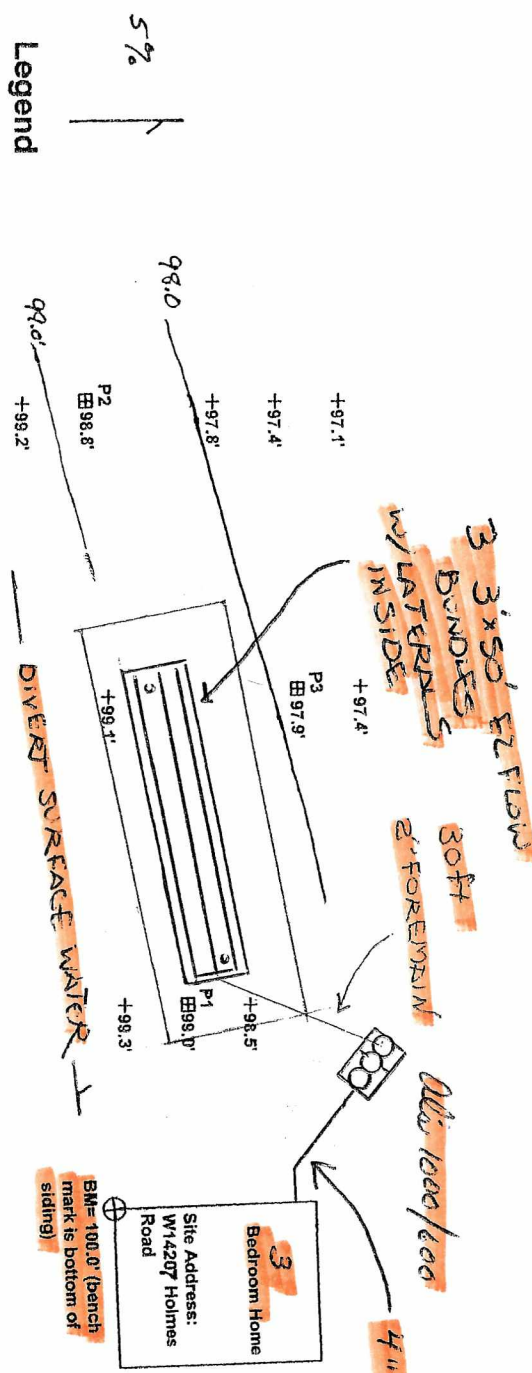
Center Line of Holmes Road

Center Line of Holmes Road

Center Line of Holmes Road

Handwritten signature

* Existing septic system must be properly abandoned *



Legend

- ⊞ = Boring pit
- ⊕ = Ground Elevation
- ⊙ = Well
- ⊕ = Benchmark (bottom of siding)
- - - = Contour line

80 Acres
(verify lot line prior to installation)



NE SE Legal Description 19
NW 1/4 - SW 1/4, Section 20, T 22N R 5W

Town of Hixton, Jackson County, WI
80 Acre Parcel

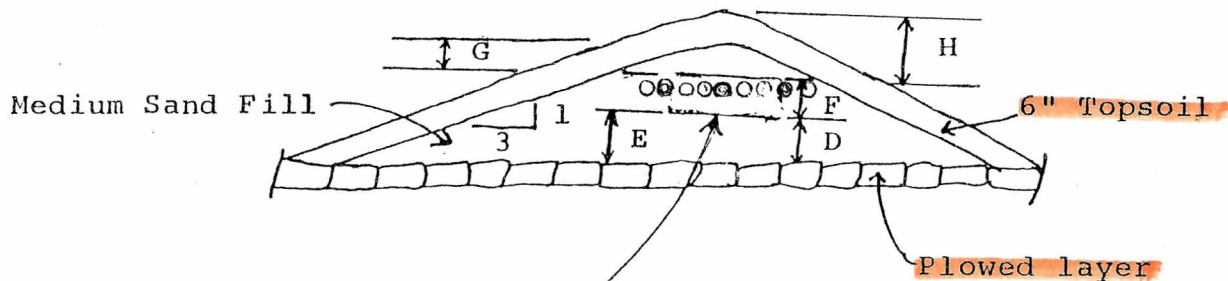
Property Owner
Trinity Farms
1100 East Taft Street
Blair, WI 54616

Drawn by: _____ Date: _____

Sheet ___ of ___ Site Plan

Prepared by
High Cliff Consulting
W13882 West Prairie Rd., Trempeau, WI 54661
palmersoiltesting@yahoo.com
Phone: 262-325-9367 Fax: 608-525-2000

Cross Section Of A Mound Using A Trench For The Absorption Area



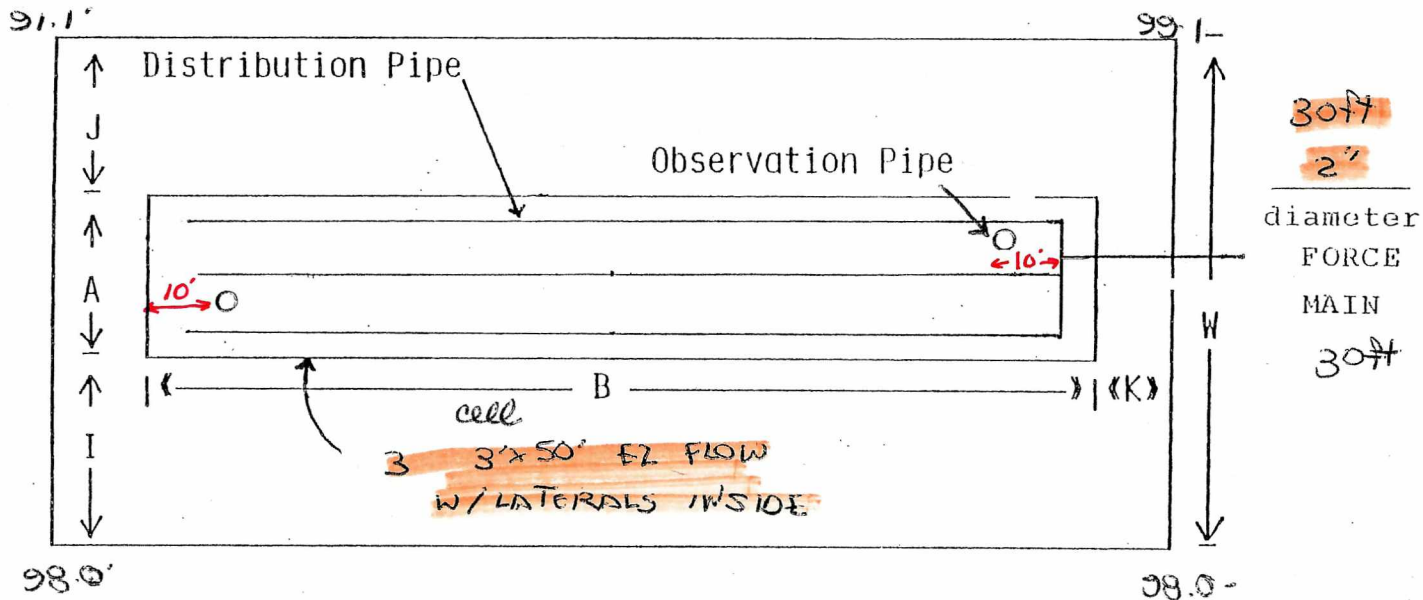
Trench Of $\frac{1}{2}$ " - $2\frac{1}{2}$ " Aggregate,
6" Below Pipe, Covered With
Straw, Marsh Hay, Or Synthetic Fabric

System Elevation 99.5'

D .5 Ft.
E .45 Ft.
F .84 Ft.
G .5 Ft.
H 1.0 Ft.

5%

Plan View Of Mound Using A Trench For The Absorption Area



A 9 Ft.
B 50 Ft.

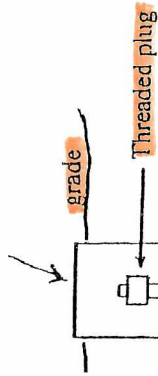
I 8 Ft.
J 5 Ft.

K 8 Ft.
L 66 Ft.

W 22 Ft.

450 gpd.
52' x 9' cell
468 sq. ft.
Access Cover

O → Observation Pipe



Extend lateral up within
six inches of final grade
on all lateral ends

END VIEW

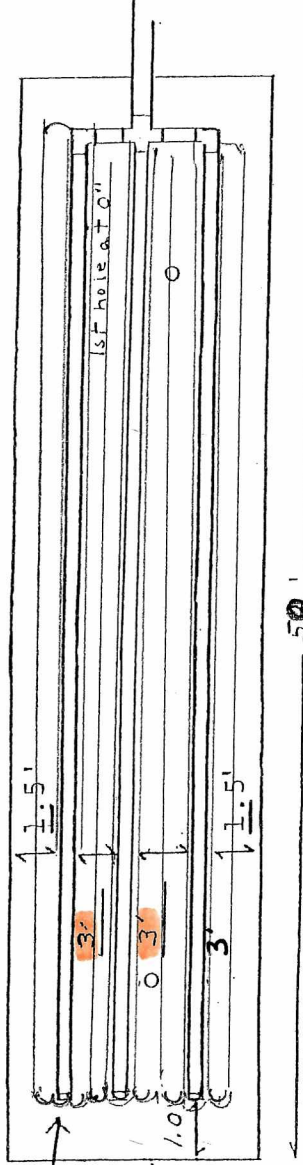


3 EZ FLOW
BUNDLES
50' LONG

PIPE LATERAL LAYOUT

99.5' /
~~100.5~~ System Elevation
~~100.9~~ Lateral Elevation
~~101~~ Lateral Elevation

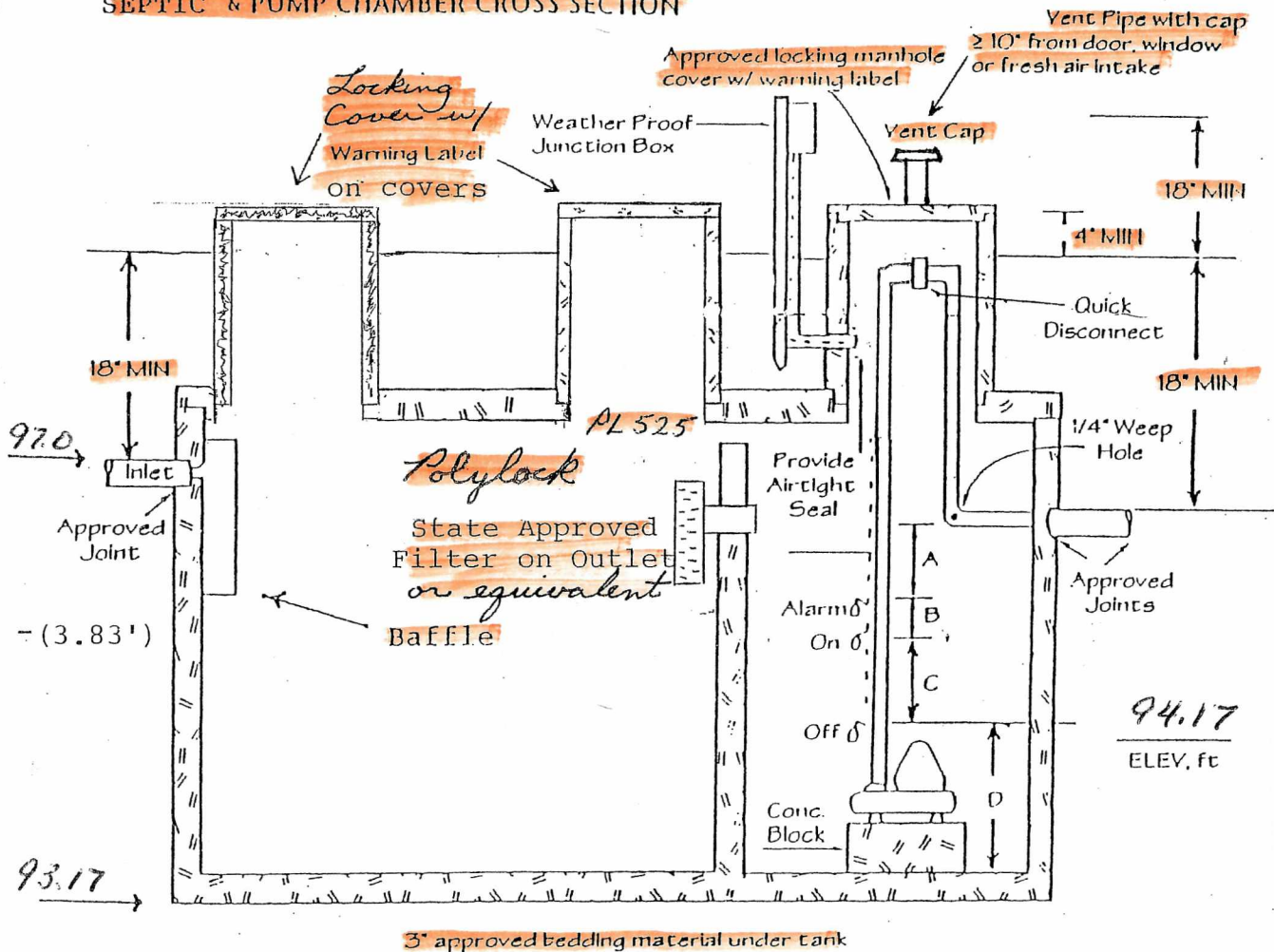
2" Force Main
30 ft in Length



1 1/2" Diameter Lateral
(PVC Sch. 40)
48' in Length
25 Holes per Lateral

2' Hole Spacing
49.5 Gallons per Minute Discharge
Rate
49.5 gal. min. dose
75 holes at .66 G.P.M. = 49.5 (not to scale)
144 ft x .092 = 13.3 x 5 = 66.3 gal. min. per dose.

SEPTIC & PUMP CHAMBER CROSS SECTION



SPECIFICATIONS

Note: Pump and alarm are on separate circuits

Tank Manufacturer: Al's Concrete
 Tank Size: 1000/600 Gallons
 Alarm Manufacturer: S.J. Electro
 Model Number: HW 101
no mercury in float
 Pump Manufacturer: GOULDS 3871
 Model Number: EPO4 EPO5
 Minimum Discharge Rate: 49.5 GPM

Number of Doses: 5.8 Per Day
 Gallons Per Day / # of Doses: 77.6 Gallons
 Volume of Backflow: 4.9 Gallons
 Total Dose Volume: 82.5 Gallons

Capacities: A 21 inches or 346.5 Gallons
 B 2 inches or 33 Gallons
 C 5 inches or 82.5 Gallons
 D 9 inches or 148.5 Gallons

Vertical Difference Between Pump Off and Distribution Pipe: : 6.8 Ft.
 Minimum Required Supply Pressure: + 3.3 Ft.
30 Ft. of Force Main x 4.99 Friction Factor/100 Ft. + 1.5 Ft.
 Total Dynamic Head = 11.63 Ft.

Depth of liquid 37"
 GALLON/inch 16.5

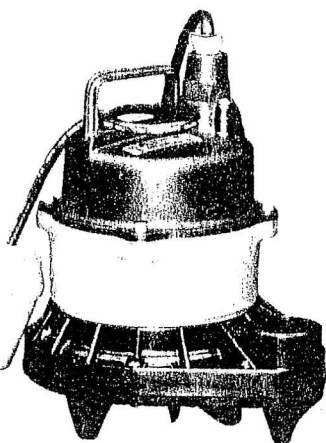
Goulds

Submersible Effluent Pump

MODEL

3871 EP04

EP05



APPLICATIONS

Specifically designed for the following uses:

- Effluent systems
- Homes
- Farms
- Heavy duty sump
- Water transfer
- Dewatering

SPECIFICATIONS

Pump: EP04

- Solids handling capability: $\frac{3}{4}$ " maximum.
- Capacities: up to 55 GPM.
- Total heads: up to 24 feet.
- Discharge size: 1½" NPT.
- Mechanical seal: carbon-rotary/ceramic-stationary, BUNA-N elastomers.
- Temperature: 104°F (40°C) continuous 140°F (60°C) intermittent.
- Fasteners: 300 series stainless steel.
- Capable of running dry without damage to components.

Pump: EP05

- Solids handling capability: $\frac{3}{4}$ " maximum.
- Capacities: up to 60 GPM.
- Total heads: up to 31 feet.
- Discharge size: 1½" NPT.
- Mechanical seal: carbon-rotary/ceramic-stationary, BUNA-N elastomers.
- Temperature: 104°F (40°C) continuous 140°F (60°C) intermittent.

- Fasteners: 300 series stainless steel.
- Capable of running dry without damage to components.

Motor:

- EP04 Single phase: 0.4 HP, 115 or 230 V, 60 Hz, 1550 RPM, built in overload with automatic reset.
- EP05 Single phase: 0.5 HP, 115 V, 60 Hz, 1550 RPM, built in overload with automatic reset.
- Power cord: 10 foot standard length, 16/3 SJTO with three prong grounding plug. Optional 20 foot length, 16/3 SJTW with three prong grounding plug (standard on EP05).

- Fully submerged in high grade turbine oil for lubrication and efficient heat transfer.

Available for automatic and manual operation. Automatic models include **Mechanical Float Switch** assembled and preset at the factory.

FEATURES

■ **EP04 Impeller:** Thermoplastic Semi-open design with pump out vanes for mechanical seal protection.

■ **EP05 Impeller:** Thermoplastic **enclosed** design for improved performance.

■ **Casing and Base:** Rugged thermoplastic design provides superior strength and corrosion resistance.

■ **Motor Housing:** Cast iron for efficient heat transfer, strength, and durability.

■ **Motor Cover:** Thermoplastic cover with integral handle and float switch attachment points.

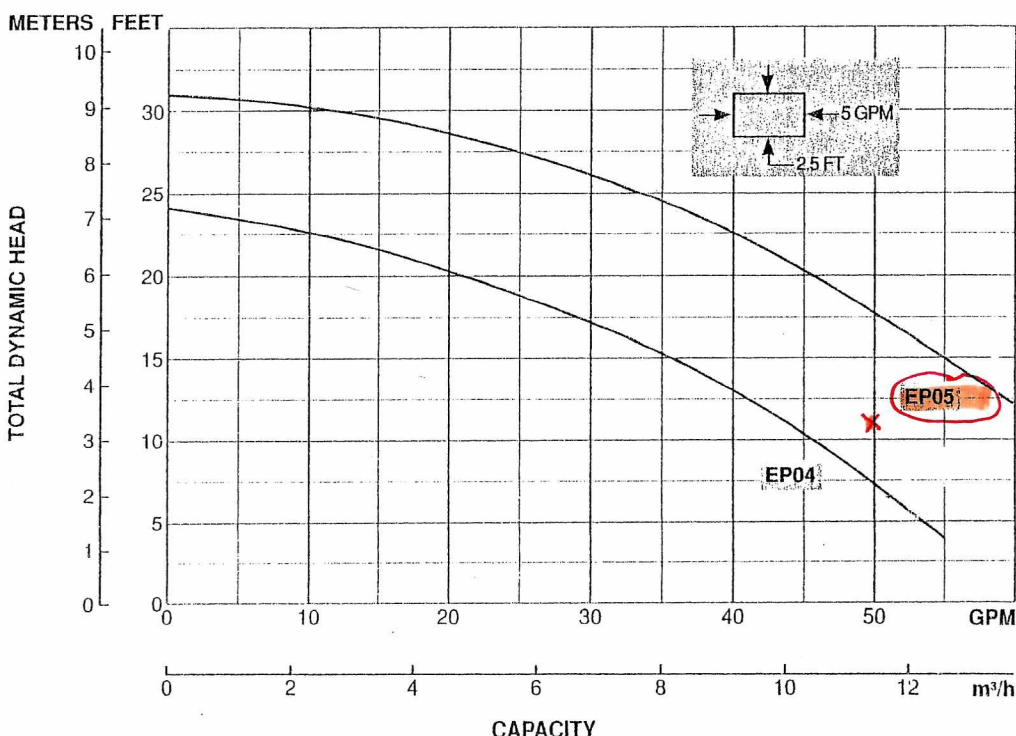
■ **Power Cable:** Severe duty rated oil and water resistant.

■ **Bearings:** Upper and lower heavy duty ball bearing construction.

AGENCY LISTING

CSA Canadian Standards Association

(CSA listed model numbers end in "F" or "AC".)



-6-

POWTS MANAGEMENT

Proper functioning of the POWTS (Private on-site Wastewater Treatment System) or "septic system" is significantly dependent on the quality (i.e. contaminants) and quantity of wastewater that goes into the system. If you lower the volume and the amount of contaminants, the system will function better and last longer—simply put LESS IS BETTER! Typical system components include a septic tank to allow the solids to settle out and contain the greases and oils, and a filter on the outlet side to catch the solids that remain suspended in the wastewater. A system may also include a pump tank with a pump and controls, where the clarified effluent accumulates for dosing, and an absorption cell where the clarified effluent is dispersed and recycled in a manner that is meant to protect the groundwater quality and public health.

GENERAL GUIDELINES

1. Install water-saving appliances whenever and wherever possible.
2. Repair any leaks (no matter how small) as soon as possible.
3. Never pour greases or oils (i.e. contaminants) down any drain or stool.
4. If you do have a garbage disposal use it sparingly.
5. Tissue is the only paper product that should be put into the system.
6. No chemical of any kind should be put into the system.
7. Maintain steady regular flows of water; spread laundry washing throughout the week.
8. Avoid vehicular traffic over all system components.
9. Compaction or removal of snow cover may lead to hydraulic failure by freezing.

MAINTENANCE

1. **CAUTION: NEVER ENTER A SEPTIC TANK.**
2. The effluent filter should be cleaned and inspected by the owner or a licensed maintenance service technician every 3 months or more often if needed. **FILTER MAINTANENCE IS THE RESPONSIBILITY OF THE SYSTEM OWNER.**
3. A properly licensed person must inspect the septic system every three years. The septic tank will require pumping if the total amount of scum and solids equals one-third or more of the tank capacity. Pumping could be required more often, depending on building waste-water flows.
4. If the tank requires pumping it must only be done by a properly licensed individual. Filters should be cleaned and inspected at every pumping.
5. The homeowner should conduct periodic observation pipe inspections (i.e. quarterly of the absorption cell). If ponding is observed, increase the frequency of the inspections and if it persists call the maintainer or installer immediately.
6. If the system has specific treatment components not mentioned here, maintenance requirements will accompany their specifications.
7. If this system incorporates the use of a pump there is an alarm system wired to a separate electrical circuit. In the event that the alarm is activated, minimize or if possible eliminate the water use and notify the maintainer or installer as soon as possible. The system is designed to allow for some reserve liquid capacity to accumulate until the necessary repairs have been made; the reserve capacity is minimal—no more than a day or two should pass before the repairs are made.
8. Wastewater monitoring of quality and quantity is not a normal requirement for residential systems; however such monitoring may become necessary if problems develop. Any necessary monitoring shall be done in accord with the requirements of Comm 83.54 (2).

CONTINGENCY PLAN

Trouble shooting will be based on the best available accepted methods and technologies developed by competent researchers and field personnel. In the event component or system failures result wastewater strength, flows, and distribution systems will be analyzed.

Influent or effluent will be properly handled and disposed of so as to comply with all provisions of Comm 83 & NR 113. Prolonged pumping and hauling of wastewater may be necessary while analysis and repairs are being implemented. When this tank is no longer used as a POWTS component, it shall be abandoned by complying with Comm 83.33.

Conclusions reached will be utilized to determine the appropriate range of responses. Responses may range from conversion of the system to a holding tank to additional soil testing and designing to obtaining approval for the installation of another County and/or State approved component(s) or system. County and State staff will be kept apprised of the situation through phone conversations and/or written correspondence. If you experience any problems contact:

Installing Plumber: Name: Stenningson Phone# 715-983-5571

Maintenance Personnel: _____ Phone# _____

County: Jackson Phone# 715-284-0220

Maintenance Management Plan for POWTS Systems

Owner: TRINITY FARMS % TRAVIS ARNITAGE Address: 1100 E TAFT ST.
BLAIR, WI 54616

Legal Description:

NE ¼ SE ¼, Section 19, T 22 N, R 05 E (W) Town of HIXTON,
Jackson County, Wisconsin.

The Owner of a Private On-Site Wastewater Treatment System (POWTS) is responsible for ensuring the proper operation and maintenance of the system.

MAINTENANCE REQUIREMENTS:

The septic tank has a filter installed as the outlet baffle to ensure that wastewater particle size greater than 1/8" does not leave the tank. The filter requires cleaning when the septic tank is serviced or when clogged (slow or sluggish draining indicates filter may be getting clogged).

Note: A clogged filter can cause tank to overflow or backup into the home. Septic and pump tank servicing shall be performed at least once every three (3) years or when the sludge and scum equals 1/3 of the volume of the septic tank. Septic and pump tank are to be serviced and pumped by a licensed pumper or POWTS maintainer.

CERTIFICATE OF OPERATION & INSPECTION

We certify that the sewage disposal system meets the following conditions:

- ☐ Is in proper operating condition
- ☐ Is being used in conformity with the purpose for which it was designed
- ☐ Septic tank is less than 1/3 full of sludge and scum
- ☐ Septic tank and pump chamber were just pumped. Date pumped: _____

Owner's Signature: _____ Date Inspected: _____
Inspector's Signature: _____ License No.: _____

Printed on recycled paper

Homeowners:

To comply with the requirements of the laws of the State of Wisconsin and the Private On-Site Wastewater Treatment System (POWTS) Ordinance of Jackson County, all private sewage systems shall be subject to an Inspection/Maintenance Program. The owner of each system will receive a Certification of Operation and Inspection postcard every three (3) years, which must be signed by the owner and a person authorized to conduct such an inspection. The person(s) authorized to conduct this inspection are Licensed Septic Tank Pumpers or Licensed Master Plumbers.

This purpose of this program is to provide good operation and a longer life for your private sewage system through proper maintenance. It will also help to protect our groundwater, streams, lakes and rivers. Here are some household tips to follow that will assist this:

DO

- * **Do** limit the water entering your tank. Use water-saving fixtures. Fix toilet float valves, leaks and dripping faucets.
- * **Do** have your tank pumped every 3 years or sooner, if necessary by a licensed Septage Pumper. **This is required by law.**
- * **Do** divert surface drainage water away from absorption field.

DON'T

- * **Do not** connect the basement sump or other clean water discharges to the septic tank.
- * **Do not** put materials down drains that will clog the septic tank (fats, greases, coffee grounds, paper towel, Sanitary napkins, disposable diapers, etc.)
- * **Do not** put toxic chemicals in drains that might end up in the ground water (cleaning fluids, paints, oils, pesticides, etc.)

The Jackson County Zoning, Planning and POWTS Department appreciates your cooperation in helping to protect our natural resources. THANK YOU! If you have any questions, contact us at (715) 284-0220.

Copy to:

Landowner

County

JACKSON COUNTY STATE SANITARY PERMIT

ZONING, PLANNING & POWTS
307 MAIN STREET, COURTHOUSE
BLACK RIVER FALLS WI 54615
(715) 284-0220

OWNER: SEDELBAUER, KIDD & ARMITAGE LLC

SANITARY PERMIT #: 2713017

OTHER APPLICANT:

LOT: CSM: 0

QTR QTR: NE 1/4, SE 1/4 SEC: 19 T22N R5W

TOWNSHIP: TOWN OF HIXTON

SOIL TEST: #

REPLACEMENT SYSTEM

SYSTEM TYPE: Mound

PLUMBER: Ivan Semingson - MP

LICENSE #: 232283

PREVIOUS PERMIT #:

Terry A. Schmidt *Dustin McCune* 6/6/2013

TERRY A. SCHMIDT	DUSTIN MCCUNE	DATE
ZONING ADMINISTRATOR	ZONING TECH	

CHAPTER 145.135(2) WISCONSIN STATUTES

- (a) The purpose of the sanitary permit is to allow installation of the private sewage system described in the permit.
- (b) The approval of the sanitary permit is based on regulations in force on the date of approval.
- (c) The sanitary permit is valid and may be renewed for specified period.
- (d) Changed regulations will not impair the validity of a sanitary permit.
- (e) Renewal of the sanitary permit will be based on regulations in force at the time renewal is sought, and that changed regulations may impede renewal.
- (f) The sanitary permit is transferable.

History: 1977 c. 168; 1979 c. 34; 1981 c.314

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

Condition: 1. All setbacks must be met.

- 2. Existing septic system must be properly abandoned.
- 3. Mound must be seeded and mulched to prevent erosion.
- 4. System elevation 99.5 Lateral elevation 100.0
- 5. Pump must be EP05

THIS PERMIT EXPIRES 6/6/2015

POST IN PLAIN VIEW

MUST BE VISIBLE FROM ROAD FRONTING THE LOT DURING CONTRUCTION

SOIL EVALUATION REPORT

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 or 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	<u>Jackson</u>
Parcel I.D.	<u>0240292.0000</u>
Reviewed by	<u>Sm (field)</u> Date <u>7/23/12</u> <u>Sm (office)</u> <u>9/26/12</u>

Property Owner <u>Trinity Farms</u> <u>C/o Travis Armitage</u>	Property Location Govt. Lot <u>NW 1/4 SW 1/4 S 20 T 22 N R 5</u> ☐ E (or) W ☒
Property Owner's Mailing Address <u>1100 East Taft St.</u>	Lot # <u> </u> Block # <u> </u> Subd. Name or CSM# <u> </u>
City <u>Blain</u> State <u>WI</u> Zip Code <u>54616</u> Phone Number <u>(608) 797-1688</u>	☐ City ☐ Village ☒ Town <u>Hixton</u> Nearest Road <u>Holmes Rd</u>

☐ New Construction Use ☒ Residential / Number of bedrooms 3 Code derived design flow rate 450 GPD

☒ Replacement ☐ Public or commercial - Describe:

Parent material loess Flood Plain elevation if applicable N/A ft.

General comments and recommendations: SITE SUITABLE FOR mound

1 Boring # ☐ Boring ☒ Pit Ground surface elev. 99.0 ft. Depth to limiting factor 41 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	0-14	10YR 3/2		sil	2msbk	mfr	gs	2f	.6	.8
2	14-33	10YR 4/4		sil	2msbk	mfr	gs	1f	.6	.8
3	33-41	10YR 5/6		fs	Osg	ml	gs	1wf	.5	1.0
4	>41		Sandstone							
5										
6										

2 Boring # ☐ Boring ☒ Pit Ground surface elev. 98.8 ft. Depth to limiting factor 30 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 3/2		sil	2msbk	mfr	gs	2f	.6	.8
2	7-25	10YR 4/4		sil	2msbk	mfr	gs	1f	.6	.8
3	25-30	7.5YR 4/4		fs	Osg	ml	cs	-	.5	1.0
4	730		Sandstone							
5										
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

CST Name (Please Print) <u>PALMER SOIL TESTING/MARK PALMER</u>	Signature <u>[Signature]</u>	CST Number <u>224736</u>
Address <u>N27128 Lindstrom Road</u>	Date Evaluation Conducted <u>7-23-12</u>	Telephone Number <u>608-525-3723</u>

received
9/25/12 es

Property Owner Trinity Farms

Parcel ID # _____

Page 2 of 3**3**

Boring #



Boring



Pit

Ground surface elev. 97.9 ft. Depth to limiting factor 32 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 3/2		sil	2msbk	mp	gs	2F	.6	.8
2	12-26	10YR 4/4		sil	2msbk	mp	gs	1F	.6	.8
3	26-32	7.5YR 4/4		fs	org	ml	cs	-	.5	1.0

4

Boring #



Boring



Pit

Ground surface elev. _____ ft. Depth to limiting factor _____ 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

5

Boring #



Boring



Pit

Ground surface elev. _____ ft. Depth to limiting factor _____ 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

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

The Dept. of Safety and Professional Services is an equal opportunity service provider and employer. If you need assistance to access services or need material in an alternate format, contact the department at 608-266-3151 or TTY through Relay.

Center Line of Holmes Road

Center Line of Holmes Road

Center Line of Holmes Road

MLL 7-23-12

Keep system to south of this to avoid big tree

+97.4'

+97.1'

+97.4'

+97.8'

98.0

P2

+98.8'

+99.2'

+98.3'

+98.5'

P1

+99.0'

+99.3'

+99.1'

2 Bedroom Home
Site Address:
W14207 Holmes Road

BM= 100.0' (bench mark is bottom of siding)

~170' to well

Legend

⊞ = Boring pit

⊕ = Ground Elevation

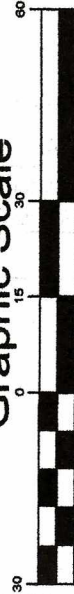
⊙ = Well

⊕ = Benchmark (bottom of siding)

- - - = Contour line



Graphic Scale



(in feet)
1 inch = 30 ft.

80 Acres
(verify lot line prior to installation)

Legal Description

NW 1/4 - SW 1/4, Section 20, T 22N R 5W
Town of Hixton, Jackson County, WI
80 Acre Parcel

Property Owner

Trinity Farms

1100 East Taft Street
Blair, WI 54616

Sheet 3 of 3

Site Plan

Prepared by

High Cliff Consulting

W13882 West Prairie Rd., Trempeau, WI 54661

palmersoiltesting@yahoo.com

Phone: 262-325-9367

Fax: 608-525-2000

JACKSON COUNTY SOIL ON-SITE REPORT SKETCH

Onsite Date: 07/23/12

Soil Tester: Mark Palmer

Owner: Travis Armitage

Inspector: Dustin McCune SUITABLE FOR: Convent At-Grade (Mound) Holding Tank Other _____

NE 1/4 SE 1/4 Sec. 19 T 22 N, R 05 W or W Township: Hixton Blk: —

Parcel Number: 024-0292.0000 Subdivision: — Lot #: — CSM #: —

Holmes Road

FIELD

● *existing drywell*

#3

● *existing tank*

#1

#2

house

shed

driveway

parcel line

(W) well

mobile home

FIELD

FIELD



Not to Scale