Aquatic Plant Management

NOTE: Missing or incomplete fields are highlighted at the bottom of each page. You may save, close and return to your draft permit as often as necessary to complete your application. If there are no updates in 90 days, your draft is deleted

This Application has been Signed and Submitted by: i:0#.f|wamsmembership|Irservice signed on 2022-03-22T11:36:47

Site or Project Name:

Beaver Dam EWM

The permit application will be saved automatically with this name

Chemical Control Application

Is there more than one property owner?

(All questions must be no for it to be considered a private pond.)

Does the water body have public access?

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Beaver Dam EWM

The permit application will be saved automatically with this name

Chemical Control Application

Will there be uncontrolled surface water discharge?

Yes No

Enter previous years permit information below to import Contact Information (Optional)

3200-004 Chemical Aquatic Control Application

NOTE: To be considered a private pond, a waterbody must meet all of the following requirements:

- 1. Confined to one property owner.
- 2. The pond has no uncontrolled surface water discharge.
- 3. No public access.

Upon submittal of your permit application, a **non-refundable \$20 permit processing fee will be charged**. Additional acreage fees will be refunded if the permit request is denied or if no treatment occurs.

3200-004 Chemical Aquatic Plant Control Application

- Annually complete all pages on Form 3200-004 for chemical plant management applications. Complete form 3200-004a for large scale treatments(exceeds 10.0 acres in size or 10% of the area of the water body that is 10 feet or less in depth) as required by NR107.04(3).
 - Form 3200-004 is competed electronically through this system.
 - Form 3200-004a must be completed outside the system and uploaded to the attachments section. Please refer to this link for a copy of this form: http://dnr.wi.gov/files/pdf/forms/3200/3200-004A.pdf
- Attach a map that shows the treatment location(s), treatment dimensions and riparian landowners. If requesting WPDES
 coverage, attach a water body map that shows surface outflow and receiving waters.
- For a large-scale treatment, attach evidence that a public notice has been published in a regional / local newspaper and if required that a public informational meeting has been conducted as defined in NR107.04(3).
- Pay fee online.
- Sign and Submit form.
- A signed permit application certifies to the Department that a copy of the application has been provided to any affected property owner's association/district and to landowners adjacent to treatment area.

Contact Information		
Applicant Information		
Organization	Lake Restoration, Inc Tom Schroeder	
Last Name:	Hadler	
First Name:	Chad	
Mailing Address:	12425 Ironwood Circle 1870 Hines Lakeview Dri	ve
City:	Rogers Cumberland	
State:	MN WI	
Zip Code:	55374 54829	
Email:		
Phone Number: (xxx-xxx-xxxx) Alternative Phone Number: (xxx-xxx-xxxx)		
Waterbody Address		
Last Name:		
First Name:		
Street Address:	varies locations	
City:	Cumberland	
State:	<u>WI</u>	
Zip Code:	54829	
Email:		
Phone Number:		
(xxx-xxx-xxxx) Alternative Phone Number:		
(xxx-xxx-xxxx)		
Applicator		
Name of Applicator Firm:	Lake Restoration Inc	
Applicator Certification #:		
Business Location License #:		
Restricted Use Pesticide #:	33 000030 000330	
	12425 Ironwood Circle	
	Rogers	
State:	-	
	55374	
	service@lakerestoration.com	
2:34		

Phone Number: (xxx-xxxx)

763-428-9777

Adjacent Riparian Property Owners or Other Individuals Sponsoring Removal

Individuals and organizations (e.g. Lake District, Lake Association, Property Owners Association, County Department of Recreation), sponsoring removal.

NOTE: Phone and email address are optional fields. This information will be publicly viewable if provided on this application.

✓ Uploaded riparian owners to attachment tab

Opioaded riparian owners to attaching	CIIL Lab		
Name	Address	Phone	Email Address

Site Information - Complete Water Body to be Treated **Waterbody Property Owners Association** Bone Lake Management District or Waterbody District Representative: □ None Beaver Dam **Water Body Name:** Barron County: 43.29265 45.555333 Latitude: -88.513731 -92.38737 Longitude: Section: 01 Township: 35 13 Range: Direction: ○ E • W **Waterbody Surface Area:** 1,112 acres Estimated Surface area that is 10ft or less 300 acres

Proposed Treatment Area

Area(s) Proposed for Control:

Area(s) Proposed for Conf	trol:				
Site Name	Treatment	Treatment Width	Estimated Acreage	Average Depth Calculated Volu	
(Optional)	<u>Length</u>				
	0 ft. x	0 ÷ 43,560 ft. ²	= 1.09 ac	14 ft =	15.26 ac-ft
	f	t.			
	0 _{ft. x}	0 \div 43,560 ft. ²	= 5.46 ac	7 ft =	38.22 ac-ft
	f	t.			
	0 ft. x	0 \div 43,560 ft. ²	= 1.08 ac	13 ft =	14.04 ac-ft
	f	t.			
	0 ft. x	0 ÷ 43,560 ft. ²	= 1.92 ac	9 ft =	17.28 ac-ft
	f	t.			
	0 ft. x	0 ÷ 43,560 ft. ²	= 2.16 ac	2 ft =	4.32 ac-ft
	f	t.			
	0 ft. x	0 ÷ 43,560 ft. ²	= 3.57 ac	4 ft =	14.28 ac-ft
	f	t.			
	0 ft. x	0 ÷ 43,560 ft. ²	= 2.21 ac	6 ft =	13.26 ac-ft
	f	t.			

0	ft. x 0	÷ 43,560 ft. ² =	2.17	ac	5 ft =	10.85	ac-ft
0	ft. ft. x	÷ 43,560 ft. ² =	2.81	ac	5 ft =	14.05	ac-ft
	ft.	Estimated Acreage Grand Total		22.47 _{ac}	Calculated Volume Grand Tota		ac-ft
Is the area with in or adjacent to a sensitive are	ea designat	ed by the Department of N	latural Re	esources.			

If the estimated acreage is greater than 10 acres, or is greater than 10 percent of the estimated area 10 feet or less in depth in Section II, complete and attach Form 3200-004A, Large-Scale Treatment Worksheet.

Chemical Aquatic Plant Control Information - Form 3200-004 (R 2/17)

☐ Agristar 2,4-D Amine

☐ Algimycin PWF

☐ Clipper

☐ Clipper SC

Notice: Use of this form is required by the Department for any application filed pursuant to s. 281.17(2), Wis. Stats., and Chapters NR 107, 200

the state. Personally identifiable informa Law [ss. 19.31-19.39, Wis. Stats.].	•	equesters to the extent required by Wisconsin'	s Open Records
Is this permit being requested ● Yes ○ No	in accordance with an appro	oved Aquatic Plant Management Pla	an?
Treatment Type: ● Lake ○ Pond ○ Wetland ○	Marina 🔾 Other		
Goal of Aquatic Plant Control:			
 ☐ Maintain navigation channel ☐ Maintain boat landing and carr ☐ Improve fish habitat ☐ Maintain swimming area ☑ Control of invasive exotics ☐ Other 	ry in access		
Nuisance Caused By:			
☐ Floating water plants (majority	of leaves floating on water surf	ove water surface, e.g. cattail, bulrushe face, e.g., water lilies, duckweed) ring parts may be exposed: milfoil, coor	
List Target Plants			
 ☐ Algae ☐ Common/Glossy Buckthorn ☐ Coontail ☐ Curly-Leaf Pondweed ☐ Duckweed ☐ Elodea ☑ Eurasian Watermilfoil 	 ☐ Flowering Rush ☐ Hybrid Cattail ☐ Hybrid Watermilfoil ☐ Japanese Knotweed ☐ Naiad ☐ Narrow-Leaf Cattail ☐ Phragmites 	 □ Purple Loosestrife □ Reed Canary Grass □ Reed Manna Grass □ Starry Stonewort □ Yellow Floating Heart □ Yellow Iris □ Pondweed 	
Other Target Plants:			
Note: Different plants require different of Chemical Control Full Trade Name of Proposed (ot purchase chemical before identifying plants.	

☐ K-Tea

Littora

☐ SCI-62

☐ Sculpin G

☐ Alligare 2,4-D	☐ Current		☐ Milestone	☐ SeClear
☐ Alligare Argos	Cutrine-Plus		☐ Nautique	☐ SeClear G
☐ Alligare Diquat	☐ Cutrine-Plus G	Granular	☐ Navigate	☐ Shoreklear-Plus
☐ Alligare Ecomazapyr	☐ Cutrine-Ultra		☐ Navitrol	☐ Shredder Amine
☐ Alligare Glyphosate 5.4	☐ DMA 4 IVM		☐ Navitrol DPF	☐ Sonar AS
☐ Aqua Neat	☐ Earthtec		☐ Phycomycin SCP	☐ Sonar Genesis
☐ Aqua Star	Element 3A		☐ Polaris	Sonar H4C
AquaPro	Flumioxazin 51	L% WDG	Polaris AC	☐ Sonar PR
Aquashade	Formula F-30		Pond-Klear	☐ Sonar Q
Aquashadow	☐ Garlon 3A		✓ ProcellaCOR EC	Sonar RTU
Aquastrike	Green Clean		Refuge	Sonar SRP
Aquathol K	Habitat		Renovate 3	☐ SonarOne
Aquathol Super K	Harpoon		Renovate LZR	☐ Stingray
☐ Avast! SC	Harvester		Renovate LZR Max	, ,
Captain	Havoc Amine		Renovate Max G	☐ Touchdown Pro
☐ Captain XTR	☐ Hydrothol 191		Renovate OTF	☐ Tribune
Chinook	☐ Hydrothol Gra	inuiar	☐ Reward	☐ Trycera
☐ Clearcast ☐ Clearigate	☐ Komeen☐ Komeen Cryst	al	☐ Rodeo☐ Roundup Custom	☐ Weedar 64☐ Weedestroy AM-40
Other Proposed Chemical(s): Have the proposed chemicals I All Some None What were the results of the to The results were very good, howe Method of Application:	reatment? ver EWM remains			te?
NOTE: Chemical fact sheets for aq Resources upon request. Alternatives to Chemical Control:	uatic pesticides u Feasible?	sed in Wiscon		he Department of Natural
Mechanical harvesting	○ Yes ● No	See Beaver Da	m Lake Report	
2. Manual removal	○ Yes ● No	See Beaver Da		
3. Sediment screens/covers	○ Yes ● No			
		See Beaver Da		
4. Dredging	○ Yes ● No	See Beaver Da	·	
5. Waterbody drawdown	O Yes No	See Beaver Da	m Lake Report	
6. Nutrient controls in watershed	O Yes No	See Beaver Da	m Lake Report	

Note: If proposed treatment involves multiple properties, consider feasibility of EACH alternative for EACH property owner.

Will surface water outflow and/or overflow be controlled to prevent chemical loss? ● Yes ○ No ■ Yes ○ No
Is the treatment area greater than 5% of surface area? • Yes O No
Waterbody concentration calculations (in ppm.) Refer to DNR Waterbody pages http://dnr.wi.gov/lakes to answer the following:
Does the waterbody stratify? ● <i>Yes</i> ○ <i>No</i>
 If yes, calculate whole waterbody concentration using volume above thermocline. If no, calculate whole waterbody concentration using total lake value
Whole Waterbody Concentration .18 ppm
WPDES Permit Request Is WPDES coverage being requested? Refer to http://dnr.wi.gov/topic/wastewater/aquaticpesticides.html for more information
Yes - complete section VII with signature.
○ No○ Already have WPDES○ WPDES coverage not needed
WPDES Detail
Select which permit you are requesting: WI-0064556-1 Aquatic Plants, Algae & Bacteria WI-0064564-1 Aquatic Animals WI-0064581-1 Mosquitoes & other Flying Insects
Indicate WPDES permittee responsible for the pollutant discharge: • Applicator • Sponsor
Do you expect the pest control activity will result in a detectable pollutant discharge to waters of the state beyond the treatment area boundary or a pollutant residual in waters of the state after the treatment project is completed? Yes No
If yes, identify the pollutant(s):
Are you planning to incorporate integrated pest management principles, as specified in the WPDES permit, into your pest control activity to minimize any pollutant residual or pollutant discharge beyond the treatment area? \bullet Yes \bigcirc No
Type of WPDES coverage being requested: ○ One Treatment Site Statewide Coverage
For informational purposes, select areas of WI for most of your aquatic treatments:

Is WPDES coverage being requested for more than 1 year? Yes ○ No
If yes, the permittee will remain in "active" WPDES status until a Notice of Termination is submitted

 \square NE \checkmark NW \square SW \square SE

Required Attachments and Supplemental Information

Upload Required Attachments (15 MB per file limit) - Help reduce file size and trouble shoot file uploads

* indicates completion of this item is required

Note: To add additional attachments using the down arrow icon. To replace an existing file, use the 'Click here to attach file ' link. To remove additional items, select the item and press CNTRL Delete.

Riparian Owners	■ File Attachment	AdjacentProperties.xlsx
Public Notice	■ File Attachment	PublicNotice.pdf
Large Scale Worksheet	File Attachment	
Site Map	■ File Attachment	2022EWMManagementPlan.pdf

Fee Calculation

Chemical Control Application

- 1. s. NR 107.11(1), Wis. Adm. Code, lists the conditions under which the permit fee is limited to the \$20 minimum charge.
- 2. s. NR 107.11(4), Wis. Adm. Code, lists the uses that are exempt from permit requirements.
- 3. s. NR 107.04(2), Wis. Adm. Code, provides for a refund of acreage fees if the permit is denied or if no treatment occurs.

9) 4/	If Proposed treatment is over 0.2 (round up to nearest whole acre,
\$575.00	acres X \$25 per acre = \$ If proposed treatment is less than
ermit Fee (non-refundable) \$20.00	
Total Fee \$595	

Payment Information

Invoice Number: WP-00034091

Payment Confirmation Number: WS2WT3008201043

Amount Paid: \$595

Sign and Submit

Applicant Responsibilities and Certification

- 1. The applicant has prepared a detailed map which shows the length, width and average depth of each area proposed for the control of rooted vegetation and the surface area in acres or square feet for each proposed algae treatment.
- 2. The applicant understands that the Department of Natural Resources may require supervision of any aquatic plant management project involving chemicals. Under s.NR 107.07 Wis. Adm. Code, supervision may include inspection of the proposed treatment area, chemicals and application equipment before, during or after treatment. The applicant is required to notify the regional office 4 working days in advance of each anticipated treatment with the date, time, location and size of treatment unless the Department waives this requirement. Do you request the Department to waive the advance notification requirement?
 - Yes No
- 3. The applicant agrees to comply with all terms or conditions of this permit, if issued, as well as all provisions of Chapter NR 107, Wis. Adm. Code. The required application fee is attached.
- 4. The applicant will provide a copy of the current application to any affected property owners' association inland Lake District and, in the case of chemical applications for rooted aquatic plants, to all owners of property riparian or adjacent to the treatment area. The applicant has also provided a copy of the current chemical fact sheet for the chemicals proposed for use to any affected property owner's association or inland Lake District.
- 5. Conditions related to invasive species movement. The applicant and operator agree to the following methods required under s.NR 109.05(2), Wis. Adm. Code for controlling, transporting and disposing of aquatic plants and animals, and moving water:
 - Aquatic plants and animals shall be removed and water drained from all equipment as required by s.30.07, Wis. Stats., and ss. NR 19.055 and 40.07, Wis. Adm. Code.
 - Operator shall comply with the most recent Department-approved 'Boat, Gear, and Equipment Decontamination and Disinfection Protocol', Manual Code #9183.1, available at http://dnr.wi.gov/topic/invasives/disinfection.html

All portions of this permit, map and accompanying cover letter must be in possession of the chemical applicator at the time of treatment. During treatment all provisions of Chapter NR 107 107.07 and NR 107.08, Wis. Adm. Code, must be complied with, as well as the specific conditions contained in the permit cover letter.

I hereby certify that that the above information is true and correct and that copies of the application shall be provided to all affected property owners promptly and that the conditions of the permit will be adhered to. All portions of this permit, map and accompanying cover letter must be in possession of the applicant or their agent at time of plant removal. During plant removal activities, all provisions of applicable Wisconsin Administrative Rules must be complied with, as well as the specific conditions contained in the permit cover letter.

Steps to Complete the signature process

IMPORTANT: All email correspondence will be sent to the address associated with your WAMS ID).

- 1. Read and Accept the Responsibilities and Certification
- 2. Press the Initiate Signature Process button
- 3. Open the confirmation email for a one time confirmation code and instructions to complete the signature process.

You will receive a final acknowledgement email upon completing these steps .

✓ Check if you are signing as Agent for Applicant.

i:0#.f|wamsmembership|Irservice signed on 2022-0

I hereby certify that the above information is true and correct and that copies of this submittal shall be provided to the appropriate parties named in the contact section and that the conditions of the permit and pesticide use will be adhered to.