



April 10, 2015

Jeff Stelzer
Lake and Pond Solutions
W4950 Hwy A
Elkhorn, WI 53121

Subject: Aquatic Plant Management Permit Application

Dear Jeff:

Enclosed is your approved permit for the chemical treatment of aquatic plants in Wandawega Lake, Walworth County (Permit number SE-2015-65-490). Please note that the chemicals Clipper and Navitrol DPF were crossed off in Section V of the permit application. The proposed treatment is a maximum of 3.0 acres.

This permit has been issued in accordance with Wisconsin Administrative code NR 107. Aspects of this permit may not be changed without prior approval of the Department of Natural Resources. Issuance of this permit is not an endorsement for the action authorized. Please note permit conditions below.

PERMIT CONDITIONS

1. The permit holder, according to NR 107.08(8), shall submit the Aquatic Plant Management Treatment record for treatment as follows:
 - A. Immediately, if any unusual circumstances occur during treatment.
 - B. Within 30 days, if treatment occurs.
 - C. By October 1 of this year if no treatment occurred.
2. A copy of the permit application must be provided to riparian property owners in and adjacent to the treatment area before the treatment may occur. The application may be provided by US mail, e-mail, or a US mail postcard directing the property owner to a public website that has posted the permit application.
3. Treatment concentration cannot exceed maximum recommended dosage for target species, as listed on the product label.

4. All equipment used in the lake must be sterilized before entering waters of the state and must abide by all provisions of NR 40.
5. Posting signs shall be placed on each individual property in and adjacent to treatment area. These posting signs shall clearly indicate which properties have and have not had treatment in front of their riparian property. A posting sign shall also be provided at the public boat launch, which will include a map of the treatment area.
6. Treatment in the permitted application area will not be performed in front of riparian property if the owners have indicated that they do not want treatment in writing to the Wandawega Country Club and/or the Department of Natural Resources.
7. Herbicide applications may be limited in areas where high value native aquatic plants (such as native pondweeds, native milfoils, water shield, water lilies, bulrush, water celery, bladderwort, naiads, crowfoot, etc) are more abundant than eurasian water milfoil or curly leaf pondweed.
8. Treatment of white water lily and watershield will only be considered in areas exhibiting severe navigational impediments.
9. You must notify Lakes Biologist Heidi Bunk (262.574.2130) a minimum of 4 working days prior to anticipated treatment to schedule supervision.
10. Any additional areas to be considered for treatment must be mapped and submitted to Lakes Biologist Heidi Bunk (262.574.2130) a minimum of 4 working days prior to anticipated treatment.

Chemical treatment exceeding 3.0 acres will require an additional permit from the Department. Future permit applications will be evaluated based on the information at that time.

Please feel free to contact me at 262-574-2130 or by email at heidi.bunk@wisconsin.gov if you have any questions.

Sincerely,



Heidi Bunk

Lakes Biologist

Chemical Aquatic Plant Control Application and Permit
 Wisconsin Pollutant Discharge Elimination System (WPDES) Pesticide Pollutant
 Application

RECEIVED

Form 3200-004 (R 03/13)

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 and 205, Wis. Adm. Code. This permit application is required to request coverage for pollutant discharge into waters of the state. Personally Identifiable Information on this form may be provided to requesters to the extent required by Wisconsin's Open Records Law [ss. 19.31-19.39, Wis. Stats.].

APR 30 2015

WT/3 - WT/3 - OGI

DNR Use Only	
ID Number SE-2015-165-490	Permit Expiration Date 10.01.2015
Waterbody # 740700	Fees Received \$95.00

Section I - Applicant Information -

Name of Permit Applicant, Also Indicate names and addresses of all individuals, associations, communities of town sanitary districts sponsoring treatment. Attach additional sheets if necessary.

Home Address	Name Lake and Pond Solutions Co.			Lake Address	Name Wandawega Country Club		
	Street Address W4950 County Rd A				Street Address PO Box 624		
	City Elkhorn	State WI	ZIP Code 53121		City Elkhorn	State WI	Zip Code 53121
Phone Number (include area code) Primary: 262-742-2600 Secondary:				Email Address jeff@lakeandpondsolutions.com			

Section II - Aquatic Plant Control

Waterbody to be Treated (waterbody where treatment area is located) Lake Wandawega				Lake Surface Area 119.35 acres	Estimated Surface Area that is 10 Feet or Less in Depth _____ acres
County Walworth	Section 1,2,11,12	Township T3N	Range R16E	Name of Applicator or Firm Lake and Pond Solutions Co.	
Latitude: 42.743404	Longitude: 88.567093			Street or Route W4950 County Rd A	
Is the waterbody a private pond?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		City Elkhorn	State WI
Does the waterbody have public access?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		ZIP Code 53121	
Adjacent Riparian Property Owner Names (attach sheets if necessary) 1. see attached 2. _____ 3. _____ 4. _____ 5. _____ 6. _____ 7. _____				County Walworth	Phone Number (include area code) 262-742-2600
				Email Address jeff@lakeandpondsolutions.com	
				Applicator Certification Number for Category 5 Aquatic Pesticide Application 46548, 65667, 87910, 92331, 47905, 75983	
				Business Location License Number (if applicable) 93-011101-014739	
Name of Lake Property Owners' Association Representative or Lake District Representative (if none, please indicate) Joyce Hayward				Restricted Use Pesticide License Number (if applicable)	

Area(s) Proposed for Control: (Note details in permit cover letter for final permitted sizes of treatment areas.)

Treatment Length	Treatment Width	Estimated Acreage	Average Depth	Total Estimated Acres
A. _____ ft X _____ ft ÷	43,560 ft ² =	3	_____ ft	Total from lines A-E _____ Total from Attached Sheets _____ Grand Total 3
B. _____ ft X _____ ft ÷	43,560 ft ² =	_____	_____ ft	
C. _____ ft X _____ ft ÷	43,560 ft ² =	_____	_____ ft	
D. _____ ft X _____ ft ÷	43,560 ft ² =	_____	_____ ft	
E. _____ ft X _____ ft ÷	43,560 ft ² =	_____	_____ ft	

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. Private pond treatments are exempted from this requirement.

Is this area within or adjacent to a sensitive area designated by the Department of Natural Resources? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	DNR Use: NHI Review? <input type="checkbox"/> Yes <input type="checkbox"/> No Describe: _____
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**Chemical Aquatic Plant Control Application and Permit
WPDES Pesticide Pollutant Permit Application**

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Section III - Fees

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.

4. Fee calculations:

Basic Permit Fee (non-refundable)	\$20.00
If proposed treatment is over 0.25 acre, calculate acreage fee: (round up to nearest whole acre, to maximum of 50 acres.)	
<u>3</u> acres X \$25 per acre = \$	<u>75</u>
If proposed treatment is ≤ 0.25 acre, acreage fee is \$0.	
Enter Acreage Fee (from above)	<u>75</u>
Total Fee Enclosed	\$ <u>\$95.00</u>

Site Map: Attach a sketch or a printed map of lake indicating area and dimensions of each individual area where plant control is desired and flow of surface water outside treatment area. Also show location of property owners riparian to and adjacent to the treatment area. Attach a separate list of owners and corresponding treatment dimensions coded to the lake map, if necessary.

Section IV - Reasons for Aquatic Plant Control

Is this permit being requested in accordance with an approved Aquatic Plant Management Plan?

Yes No

Treatment Type:

Lake Pond Wetland Marina Other

Goal of Aquatic Plant Control:

- Reduce nuisance algae accumulation
- Maintain navigational channel for common use
- Maintain private access for boating
- Maintain private access for fishing
- Improve swimming
- Control of purple loosestrife
- Control of invasive exotics
- Other: Aesthetics

Nuisance Caused By:

- Algae
- Emergent water plants (majority of leaves and stems growing above water surface, e.g. cattails, bulrushes)
- Floating water plants (majority of leaves floating on water surface e.g. waterlilies, duckweed)
- Submerged water plants (leaves and stems below water surface, flowering parts may be exposed, e.g., milfoil, coontail)
- Other: _____

List Target Plants

EWM, CLP, algae, white water lily, watershield

Note: Different plants require different chemicals for effective treatment. Do not purchase chemical before identifying plants.

Section V - Chemical Control

Alternatives to Chemical Control:

	Feasible?	
	Yes	No
1. Mechanical harvesting	<input checked="" type="checkbox"/>	<input type="checkbox"/>
2. Hand pulling	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3. Hand raking	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4. Hand cutting	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5. Sediment screens/covers	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6. Dredging	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7. Lake drawdown	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8. Nutrient controls in watershed	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9. Other: _____	<input type="checkbox"/>	<input type="checkbox"/>

If No, Why Not?

Currently harvest but only over 3' depth
Exotics
Some resident do rake frontages
Exotics
Would limit native plants
Too costly
Not sure on feasibility
Currently unknown

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

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Section V - Chemical Control (continued)

Trade Name of Proposed Chemical(s)

ALGAECIDES: Algimycin Captain Captain XTR Cleargate Cutrine Plus Cutrine Ultra F-30 Green Clean Phycomycin K-Tea SeClear SeClear G

HERBICIDES: Aquathol K Aquathol Super K Clipper DMA-4 Habitat Navigate Navlto DPF Reward Weedestroy AM-40

GLYPHOSATES: AquaNeat Refuge ShoreKlear Touchdown Pro

OTHER:

HJB 4/10/15

Method of Application: Backpack Sprayer, 2" Commercial Sprayer, Granular Hand Spreader

Will surface water outflow and/or overflow be controlled to prevent chemical loss?

Yes No

Have the proposed chemicals been permitted in a prior year on the proposed site?

All Some None

What were the results of the treatment?

Treated beaches in 2014 with good results

Note: Chemical fact sheets for aquatic pesticides used in Wisconsin are available from the Department of Natural Resources upon request

Section VI - 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 has provided 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.

Check if you are signing as Agent for Applicant

I hereby certify that the above information is true and correct and that copies of this application have been provided to the appropriate parties named in Section II and that the conditions of the permit and pesticide use will be adhered to.



Signature of Applicant

3/18/2015

Date Signed

All portions of this permit, map and accompanying cover letter must be in possession of the chemical applicator at time of treatment. During treatment all provisions of Chapter NR 107, specifically ss. NR 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.

**Chemical Aquatic Plant Control Application and Permit
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Section VII - WPDES Permit Request

Is WPDES coverage being requested? Refer to <http://dnr.wi.gov/org/water/wm/vw/aquaticpesticides.htm> for more information.

No: Yes - complete section VII with signature

Already have WPDES coverage
 WPDES coverage not needed

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? Yes No

Types of WPDES coverage being requested: One Treatment Site Statewide Coverage

For informational purposes, select areas of WI for most of your aquatic treatments: NW NE SW SE

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.

I hereby certify that I am the authorized representative (as specified in Ch. NR 205.07(1)(g), Wis. Adm. Code) of the pest treatment activity which is the subject of this permit application. I certify that the information contained in this form and attachments is, to the best of my knowledge, true, accurate and complete.

Signature of Authorized Representative

Printed Name

Date Signed

Section VIII - Permit to Carry Out Chemical Treatment (Leave Blank - DNR Use Only)

The foregoing application is approved. Permission is hereby granted to the applicant to chemically treat the waters described in the application during the season of 20 15

Application fee received? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	State of Wisconsin Department of Natural Resources For the Secretary By <u>Heidi O Burt</u> Regional Director or Designee Date Signed <u>4/10/15</u> Date Mailed <u>4/10/15 (e-mail)</u>
Advance notification of treatment required? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

Please Note:

If you believe that you have a right to challenge this decision, you should know that Wisconsin statutes and administrative rules establish time periods within which requests to review Department decisions must be filed.

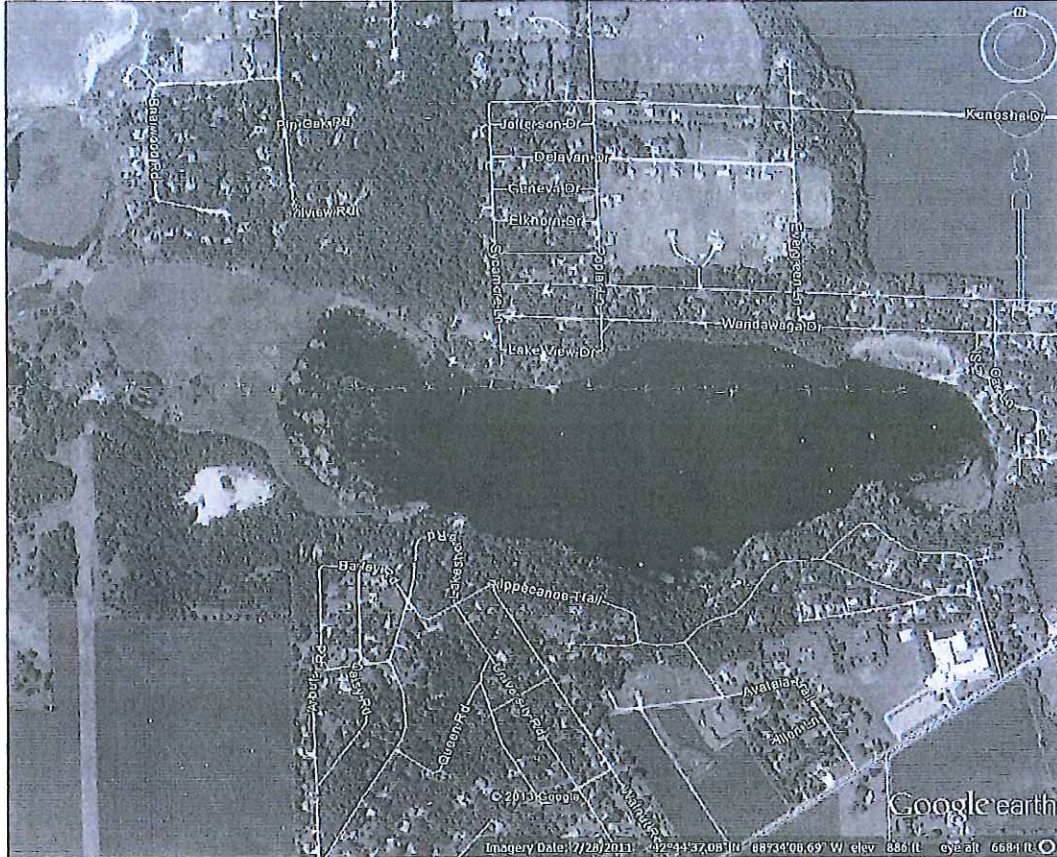
For judicial review of a decision pursuant to ss. 227.52 and 227.53, Wis. Stats., you have 30 days after the decision is mailed or otherwise served by the Department, to file your petition with the appropriate circuit court and serve the petition on the Department. Such a petition for judicial review shall name the Department of Natural Resources as the respondent.

This notice is provided pursuant to s. 227.48(2), Wis. Stats.

To request a contested case hearing pursuant to s. 227.42, Wis. Stats., you have 30 days after the decision is mailed, or otherwise served by the Department, to serve a petition for hearing on the Secretary of the Department of Natural Resources. The filing of a request for a contested case hearing is not a prerequisite for judicial review and does not extend the 30-day period for filing a petition for judicial review.



LAKE WANDAWEGA



Generally permitting slightly more acreage than riparians that requested treatment to account for last minute additions. Most will be for EWM/CLP control with two beaches for treatment. Areas will be surveyed the day of treatment.

