

**Wood County Addendum A**  
**Application for a Permit to Construct an Animal Waste Storage Facility**

Town of \_\_\_\_\_ Permit No. \_\_\_\_\_ Fee \_\_\_\_\_

Applicant (Landowner) \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ Phone No. \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Road Name \_\_\_\_\_

.....  
Description:

Govt. Lot \_\_\_\_\_, \_\_\_\_\_ 3, \_\_\_\_\_ 3, Section \_\_\_\_\_, T \_\_\_\_\_ N, R \_\_\_\_\_ E/W

Type of Construction: \_\_\_\_\_  
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Does attached plan include:

- |   |  |
|---|--|
| 1) Number and kinds of animals for which storage is provided?   | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 2) The duration for which storage is provided, or daily gallons of water and manure produced?   | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 3) A plan view of the facility and its location in relation to buildings within 1000 feet and homes within 500 feet?                              | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 4) Scale of drawing and north arrow?  | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 5) Structural details (dimensions, cross-sections, material specifications)?  | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 6) Location of any wells within 300 feet of the facility?   | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 7) Soil test, pit locations, and soil layer descriptions?   | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 8) Elevation of high groundwater or bedrock, and date determined?   | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 9) Location and distance of facility to navigable body of water (if within 1000 feet) and provisions for adequate drainage and control of runoff? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 10) Time schedule for construction of the facility?   | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 11) Description and construction plan of method of transfer into and from the facility?   | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 12) A 590 Nutrient Management Plan?   | Yes <input type="checkbox"/> No <input type="checkbox"/> |

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On site assistance provided? Yes  No  By \_\_\_\_\_ Date \_\_\_\_\_

Attached plans reviewed by: \_\_\_\_\_

Approved: Yes  No  Name \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_  
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Property owner's statement:

The undersigned hereby makes application for a permit to construct an animal waste facility on the property herein described. The work to be performed is described in the attached plan. The undersigned agrees that all such work shall comply with all applicable animal waste facility standards as set in the Wood County Animal Waste and Manure Management Ordinance, other applicable County Ordinances and the laws and regulations of the State of Wisconsin.

The undersigned also agrees to certify in writing, upon installation of the facility, that the facility was installed as planned. Deviations from the original plan must be reviewed and approved by the County Conservationist prior to installation.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_  
(Landowner)

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For Office Use:

Permit issued \_\_\_\_\_ Permit denied \_\_\_\_\_ Reason for denial \_\_\_\_\_

Construction certification received \_\_\_\_\_

