

Wood County Addendum D
Application for a Permit to Close an Animal Waste Storage Facility

Town of _____ Permit No. _____ Fee _____

Applicant (Landowner) _____ Date _____

Address _____ Phone No. _____

City _____ State _____ Zip _____ Road Name _____

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Description:

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

Type of Construction: _____
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Does attached plan include:

- | | |
|---------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| 1) A description of the type and size of the manure storage facility and an estimate of the amount of manure in the facility? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 2) A description of how and where the manure and soil saturated with manure will be land applied in accordance with Technical Standard 590? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 3) A description of how the liner, if any, will be disposed of? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 4) A description of how the manure transfer system will be removed or permanently plugged? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 5) A description of how the excavated area will be filled in and where the clean fill will come from? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 6) A plan view showing the final grade, the area to be reseeded, and how rain and runoff will be diverted away from the site? | Yes <input type="checkbox"/> No <input type="checkbox"/> |
| 7) Other additional information necessary to comply with this ordinance? | 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 close 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 closure of the facility, that the facility was closed 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 _____

Closure certification received _____