

DISCLOSURE OF MATERIAL ADVERSE FACTS

I am licensed in the state of Wisconsin as a real estate broker/salesperson **STRIKE ONE**. Wisconsin law, per Wis. Stat. § 452.133 and Wis. Admin. Code § REEB 24.07(2)-(3), requires real estate licensees to make prompt written disclosures to buyers and sellers regarding material adverse facts and regarding information suggesting the possibility of material adverse facts. In other words, the law says that I should make sure you know about certain possible problems that have not yet been reported to you by the other parties, licensees or professional inspectors.

An adverse fact is a condition or occurrence that is generally recognized by a competent real estate licensee as having a significant, adverse affect on the value of the property, as significantly reducing the structural integrity of the property, or as presenting a significant health risk to the property's occupants. An adverse fact also includes information that indicates that a party is not able or does not intend to fulfill his or her contractual obligations under the offer to purchase or other contract.

An adverse fact is material if a party indicates it is significant to them, or if it is generally recognized by a competent real estate licensee as being significant to a reasonable party, to the extent that it would impact whether or not the party enters into an offer to purchase or the party's decision about what terms and conditions should be in such a contract.

As a Wisconsin real estate licensee, I am thereby obligated by law to disclose the following information indicating a material adverse fact or suggesting the possibility of a material adverse fact: Property is being advertised as a 5 bedroom home. Assessor information indicates this is a 3 bedroom home and sanitary indicates a capacity of 4 bedrooms. This may be in part because the property was renovated by the current owners. Buyers to verify actual number of bedrooms.

(Plainly state only the facts without drawing conclusions or making predictions. Attach supporting reports and documentation.)

It is recommended that the sellers and buyers in this transaction obtain professional assistance to conduct appropriate property inspections, testing and other investigations regarding this information. The licensees in this transaction will draft inspection, testing or investigation contingencies, amendments, notices and other documents pertaining to the offer to purchase as directed by the parties.

Sellers and buyers should contact their attorneys with any questions concerning their legal rights and obligations.

M.K.

Licensee Signature ▲

Matt Kapellen, Pleasant View Realty

Print Licensee Name Here ▲

Pleasant View Realty

Broker/Firm Name ▲

March 19, 2024

Date ▲

By initialing and dating below, I acknowledge that I have received and read this disclosure form.

Party Initials ▲

Date ▲

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No representation is made as to the legal validity of any provision or the adequacy of any provision in any specific transaction.



10345 USH 151
Manitowoc, WI 54220

Phone: 920-758-2784

MPRS 224232



Fax: 920-758-2781

INSPECTION & SERVICE REPORT
SludgeHammer with Soil Absorption Area

Owner	Glen & Sandra Green	Site Address	12409 Lakeshore Rd
Address	905 Lancaster Avenue	Legal Description	GL 1 S14 17N 23E
	Downers Grove, IL 60516	Township	Centerville
Phone	(630) 890-0513 / (630) 276-3084	County	Manitowoc

802-014-005-002.03

Number of Bedrooms or Dally Flow (gpd)	600
Operational Start Date	4/22/10
County Sanitary Permit	S-27-10

SEPTIC TANK

Capacity (gallons)	768	Functional Locking Device	Yes
Material	concrete	Bacteria Sack Replaced	Yes*
Condition	Good**	Turbulence	Fair
Scum Depth	1"	Blower Operational	Yes
Sludge Depth	14"	Blower Filter Cleaned	Yes
Liquid Depth	42"	Last Pumping	4/10/2020
Pumpout Required	Yes -36% solids	Pumper	B & M Waste

CLARIFICATION TANK

Capacity (gallons)	503	Functional Locking Device	Yes
Condition	Good**	Effluent Filter Condition	Very Dirty
Water Color	Cloudy	Filter Cleaned	Yes
Sludge Depth	3"	Pumpout Required	No

DOSE TANK

Capacity (gallons)	800	Functional Locking Device	Yes
Condition	Good	pH	8
Water Color	Cloudy	Temperature (degrees F)	45
Odor	Normal	Dissolved Oxygen (ppm)	1
Pump Operational	Yes	Controls Operational	Yes



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

County
MANITOWOC

Sanitary Permit Number (to be filled in by Co.)
527090 S-27-10

Sanitary Permit Application

In accordance with s. Comm. 83.21(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 Commerce. Personal information you provide may be used for secondary purposes in accordance with the Privacy Law, s. 15.04(1)(m), Stats.

State Transaction Number
2010018

Project Address
12409 LAKESHORE ROAD

I. Application Information - Please Print All Information

Property Owner's Name
SAXON SUNRISE LLC

Parcel #
002-014-005-002.03

Property Owner's Mailing Address
6111 LAKESHORE ROAD

Property Location
Govt. Lot 1
Section 14
T 17N; R 23 E

City, State
CLEVELAND, WI

Zip Code
53015

Phone Number
920-693-3360

II. Type of Building (check all that apply)
 1 or 2 Family Dwelling - Number of Bedrooms 4
 Public/Commercial - Describe Use _____
 State Owned - Describe Use _____

Lot #
Block #
CSM Number

Subdivision Name
 City of _____
 Village of _____
 Town of CENTERVILLE

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) SLUDGEHAMMER S-86

V. Dispersal/Treatment Area Information:

Design Flow (gpd) 600	Design Soil Application Rate(gpdsf) 1.6	Dispersal Area Required (sf) 375 BASAL	Dispersal Area Proposed (sf) 650 BASAL	System Elevation 104.1'
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VI. Tank Info

	Capacity in Gallons		Total Gallons	# of Units	Manufacturer	Prefab Concrete	Site Constructed	Steel	Fiber Glass	Plastic
	New Tanks	Existing Tanks								
Septic	768 + 503	-	1271	-	WIESER CONCRETE	X				
Dosing Chamber	800	-	Combo	-	WIESER CONCRETE	X				

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

Plumber's Name (Print) SUSAN J. SCHAMBURECK	Plumber's Signature <i>SJ Schmbureck</i>	MP/MPRS Number MPRS 227140	Business Phone Number (920) 758-2784
Plumber's Address (Street, City, State, Zip Code) 10503 USH 151; MANITOWOC, WI 54220			

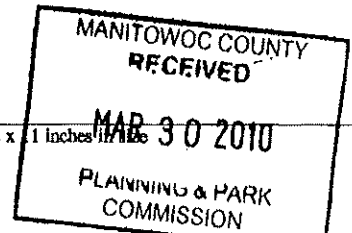
VIII. County/Department Use Only

<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved <input type="checkbox"/> Owner Given Reason for Denial	Permit Fee \$ 450. ⁰⁰	Date Issued 4-6-10	Issuing Agent Signature <i>Karla Welcher</i>
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IX. Conditions of Approval/Reasons for Disapproval

County

Attach to complete plans for the system and submit to the County only on paper not less than 8 1/2 x 11 inches





Manitowoc County Planning and Park Commission

4319 EXPO DRIVE, P.O. BOX 610

MANITOWOC, WI 54221-0610

PLANNING AND PARK..... 920-683-4185
CODE ADMINISTRATION 920-683-4187
FAX..... 920-683-4190

Sanitary Permit Number: 527090 S-27-10

Permit Issue Date: 4-6-10

MAINTENANCE PROGRAM

Dear Sanitary Permit Applicant:

Owners of all new or replacement private sewage systems installed after August 16, 1983, are required to submit to the Manitowoc County Planning and Park Commission Office a certification form (to be provided by Manitowoc County Planning and Park Commission) every 3 years, signed by the owner and signed by a master plumber, a journeyman plumber or restricted plumber licensed under ch. 145, Stats., a person licensed under s. 146.20, State., (waste hauler) or by an employee of the governmental unit or state designated by the department, who has inspected the system. The form shall require certification that the system is in proper operating condition, and that after inspection, and pumping if necessary, the septic tank is less than 1/3 full of sludge and scum.



Manitowoc County Planning and Zoning Department
4319 Expo Drive, P.O. Box 610
Manitowoc, WI 54221-0610

Planning _____ 920-683-4185
Code Administration _____ 920-683-4187
Fax _____ 920-683-4190
e-mail: planningandparks@co.manitowoc.wi.us web site: www.co.manitowoc.wi.us

April 5, 2010

OWNER'S NAME: SAXON SUNRISE LLC
LEGAL: NE¼, NW¼, S.14, T17N-R23E
MUNICIPALITY: TOWN OF CENTERVILLE
SYSTEM TYPE: MOUND SYSTEM
PLUMBER: SUSAN SCHAMBURECK
PLAN I.D.: 2010018
FEE: \$175.00

RE: CONDITIONAL POWTS PLAN APPROVAL

The submittal described above has been reviewed for conformance with applicable Wisconsin Administrative Codes and Wisconsin Statutes. The submittal has been **CONDITIONALLY APPROVED**. 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 "EZ Flow Mound Component Manual (N.06/03) and the "Pressure Distribution Component Manual for Private Onsite Wastewater Treatment Systems VERSION 2.0" SBD-10706-P (N.01/01).

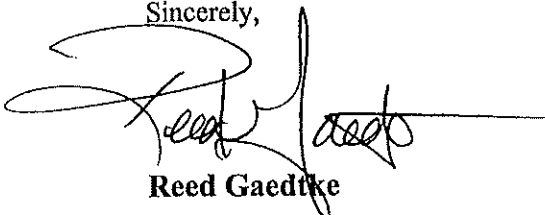
The licensed plumber responsible for the installation shall keep a copy of the approved plans with the Department's stamp of approval with all specifications and this letter on-site during construction and all work open for inspection by authorized representatives of the Department. The installer shall notify the appropriate inspector when inspections can be made.

In granting this approval the Division of Safety & Buildings or Manitowoc County Planning and Park reserve the rights 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.

This plan approval will expire two years from the approval date, or if a sanitary permit is obtained, plan approval will expire on the day the initial sanitary permit expires. All permits required by the state or the local municipality shall be obtained prior to commencement of construction/installation/operation.

Inquiries concerning this correspondence may be made to me at the telephone number or address listed above.

Sincerely,



Reed Gaedtke

Madson Tiling & Excavating, Inc.

10503 USH 151
Manitowoc, WI 54220

MOUND COMPONENT WITH PRESSURIZED DISTRIBUTION EZFlow Mound Component Manual (N. 06/03) SSWMP Publication 9.6 Design of Pressure Distribution Networks for ST-SAS (01/81)

INDEX & TITLE SHEET

Project: 12409 CTH "LS"

Owner: Saxon Sunrise LLC

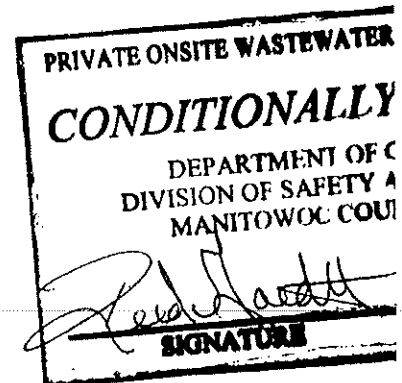
Address: 6111 Cleveland Road
Cleveland, WI 53015

Legal Description: Govt. Lot 1, Sec 14, T17N, R23E

Township: Centerville County: Manitowoc

Tax Parcel ID: 002-014-005-002.03

Page 1	Index & Title Sheet
Page 2	General Information
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Page 4	Tank Drawing & Specifications
Page 5	Mound Plan View & Cross Section
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Page 7	Pretreatment Tank Cross Section
Page 8	Sludge Hammer Specifications
Page 9	Dose Tank Cross Section & Specs
Page 10	Pump Performance Chart
Page 11	Operation & Maintenance - I
Page 12	Operation & Maintenance - II



Designer: Susan J. Schambureck License: MPRS 227140

Signature: *Susan J. Schambureck* Phone: 920/758-2784

Date: March 29, 2010

General Information

Wastewater Information

Type of Wastewater	domestic
Number of Bedrooms	4
Estimated Wastewater Flow (gpd)	400
Design Wastewater Flow (gpd)	600
Monthly Avg. FOG	<30 mg/L
Monthly Avg. BOD ₅	<30 mg/L
Monthly Avg. TSS	<30 mg/L
Fecal Coliform	<10 ⁴ cfu/100ml

Septic Tank Information

Residential Minimum Volume (gal) (based on a 3 yr. maintenance schedule)	1200
Tank Manufacturer	Wieser Concrete
Model	2000 gal 3-compartment

Effluent Filter Information

Manufacturer	Polylok
Model	PL-525

Dose Tank Information

Capacity (gal)	800
Manufacturer	Wieser Concrete
Model	2000 gal 3-compartment

Contingency Plan

- 1 - Remove all clogged material from mound and rebuild with new material.
- 2 - Install a holding tank.

Saxon Sunrise LLC
 6111 Cleveland Road
 Cleveland, WI 53015

12409 CTH "LS"
 Govt Lot 1, Sec 14, T17N, R23E
 town of Centerville
 Manitowoc County

BM = top of well
 = 100.0'

Building Sewer ±100.6'
 Septic Tank Inlet: 99.0'
 Pump: 96.1'
 System: 104.1'
 Laterals: 104.6'

TREATMENT SYSTEM

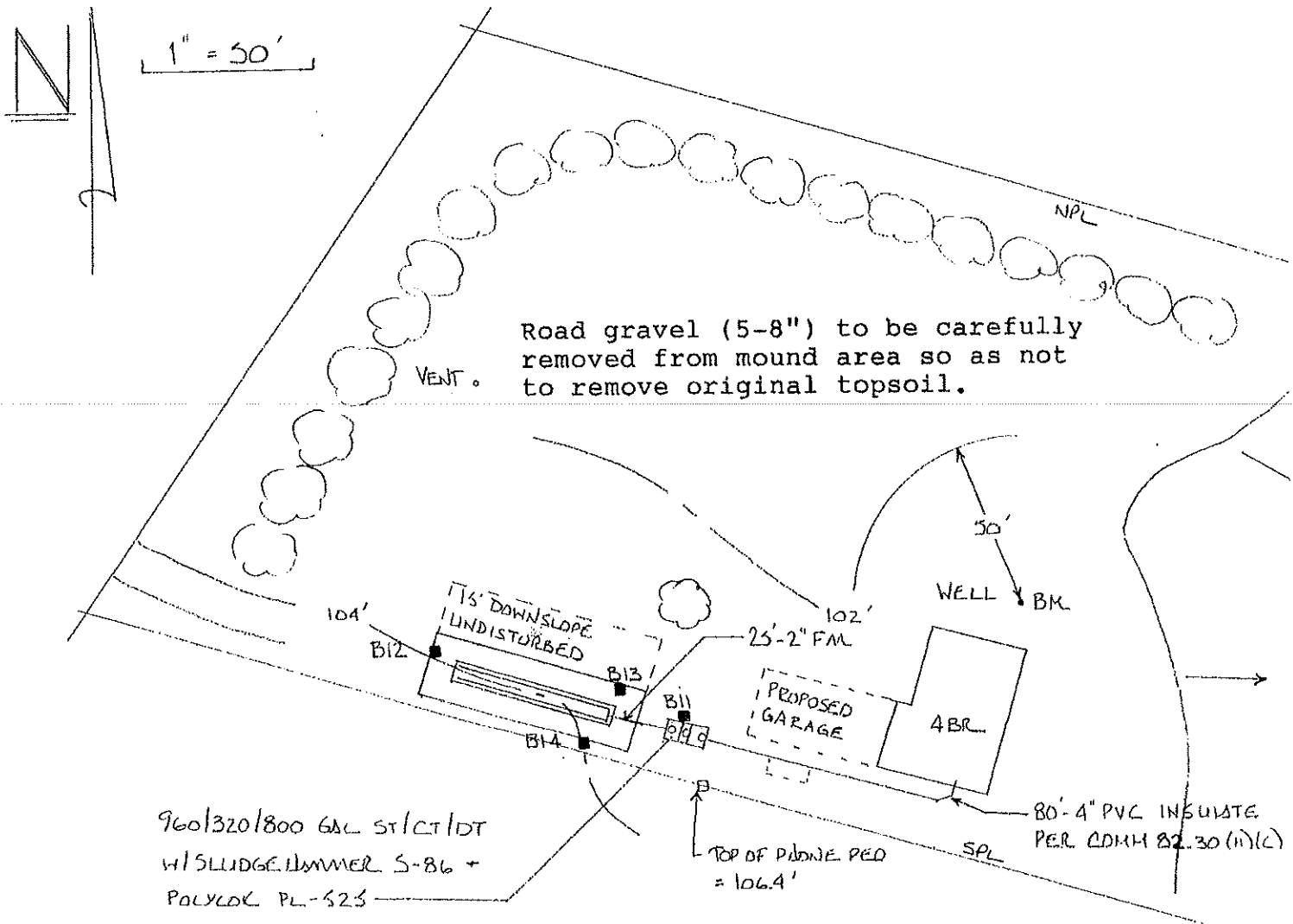
APPROVED

EMERCE
 BUILDINGS
 AGENT

4/05/10
 DATE

Owner to be provided with a User's Manual.

Abandon old system per Comm 83.



PAGE 4 OF 12

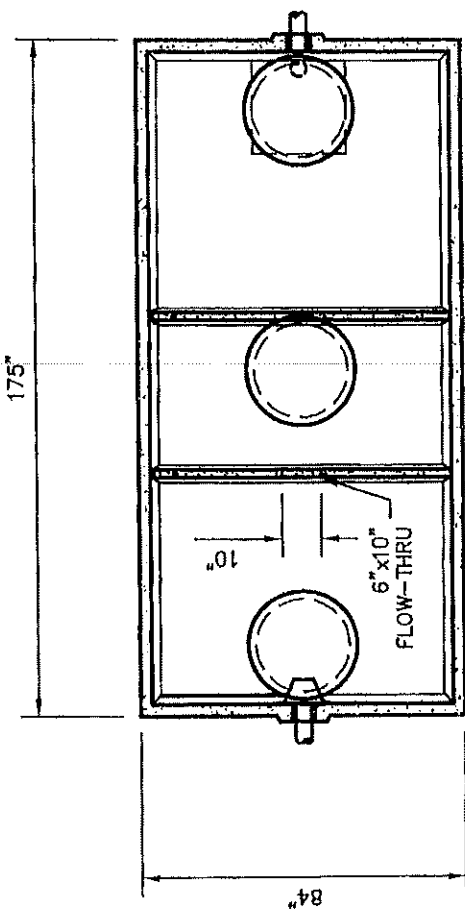
**WLP2000-FDL TRIPLE
TANK SPECIFICATIONS**

DIMENSIONS:
 WALL: 3"
 BOTTOM: 3"
 COVER: 5"
 MANHOLE: 24" I.D.
 HEIGHT: 54"-1/2" O.D.
 LENGTH: 175" O.D.
 WIDTH: 84" O.D.
 BELOW INLET: 43" O.D.
 LIQUID LEVEL: 38"
 WEIGHT: 18,000 LBS.

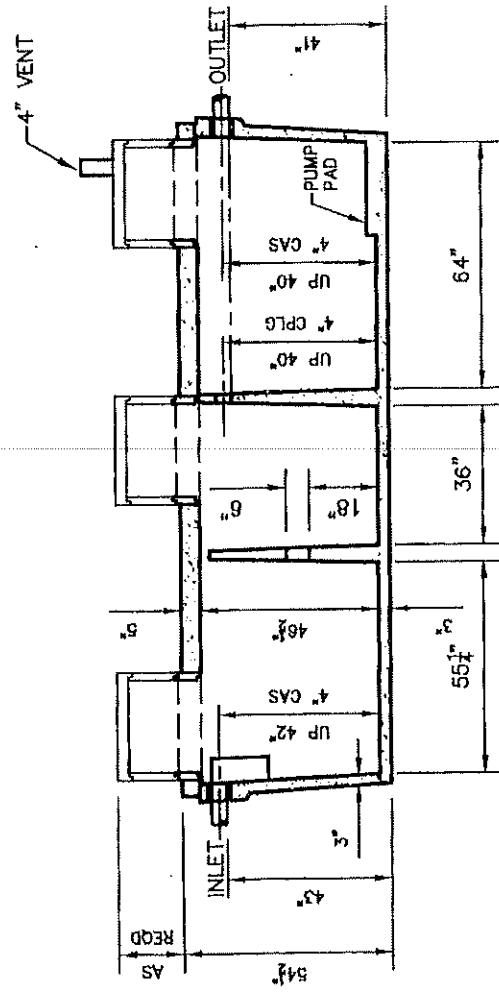
INLET AND OUTLET:
 4" CAST-A-SEAL BOOT OR EQUAL
INLET AND OUTLET BAFFLE AND FILTER:
 WISCONSIN, SEE DETAIL #10
 (OTHER STATES SEE CHART)

LIQUID CAPACITY: 20.21 GAL/IN (SEPTIC)
 13.23 GAL/IN (SEPTIC)
 20.60 GAL/IN (PUMP)

LOADING DESIGN: 8' 0" UNSATURATED SOIL
COVER: MIX DESIGN #47
TANK: MIX DESIGN #47 WITH FIBERS



TOP VIEW



SIDE VIEW

DRAWN BY: S. EBERT		SCALE: 1/4"=1'-0"		PRE-POUR:
REV.		DATE: 07/21/08		POST-POUR:
WIESER CONCRETE 2815 RILEY ROAD PORTAGE, WI 53901 800-362-7220				
MADISON TILING & EXCAV. NIEDERMAYER			PH: 920-758-2784 FAX: 920-758-2781	
SHEET NO. 1 OF 1				

**DRAWINGS SUBMITTED
FOR APPROVAL**

APPROVED BY: _____

APPROVAL DATE: _____

PRODUCTS NEEDED BY: _____

Mound Plan View & Cross Section

Site Conditions

Slope	1.0%
Depth to Limiting Factor	26.0 inches
In Situ Soil Application Rate (per Table 83.44-2)	1.6 gpd/ft ² /day
Design Wastewater Flow	600 gpd

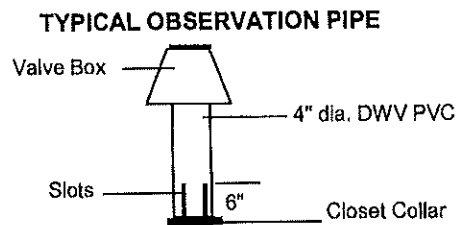
Mound Dimensions

A	6 ft	H	12 in
B	50 ft	I	7 ft
D	6 in	J	5.9 ft
E	6.72 in	K	7.6 ft
F	12 in	L	65.2 ft
G	6 in	W	18.9 ft

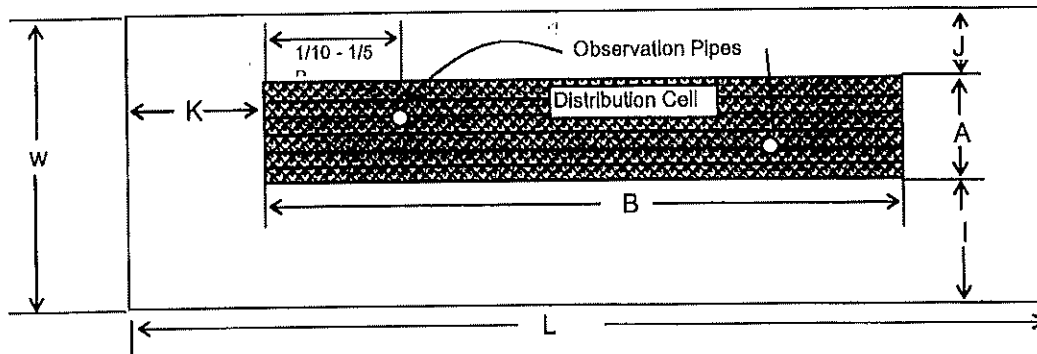
Distribution Cell

Infiltration Rate of Fill	2.0 gpd/ft ² /day
Area of Distribution Cell	300 ft ²
Distribution Cell Width (A)	6 feet
Distribution Cell Length (B)	50 feet

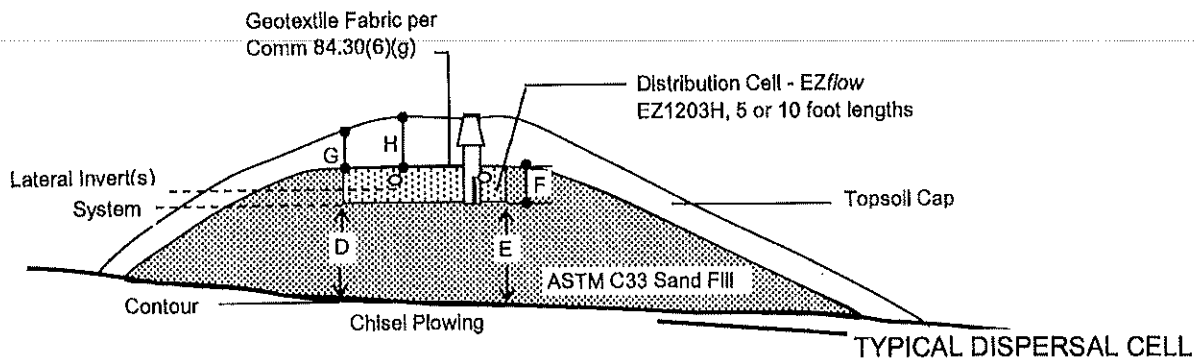
Minimum Basal Area Req.	375 ft ²
Available Basal Area	650 ft ²



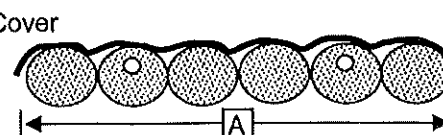
MOUND PLAN VIEW



MOUND CROSS SECTION



Slope	1%
System Elevation	104.1 feet
Lateral Invert Elevation	104.6 feet



Pressure Distribution Detail

Lateral Layout

Number of Laterals	2
Lateral Length (ft)	49
Lateral Diameter (in)	2
Lateral Spacing (ft)	3
Orifice Diameter (in)	5/32
No. Orifices / Lateral	50
Flow per Lateral (gpm)	27
Total Discharge Rate (gpm)	54
Required Distal Pressure	3.5

Manifold

Center or End Feed	end
Diameter (in)	2

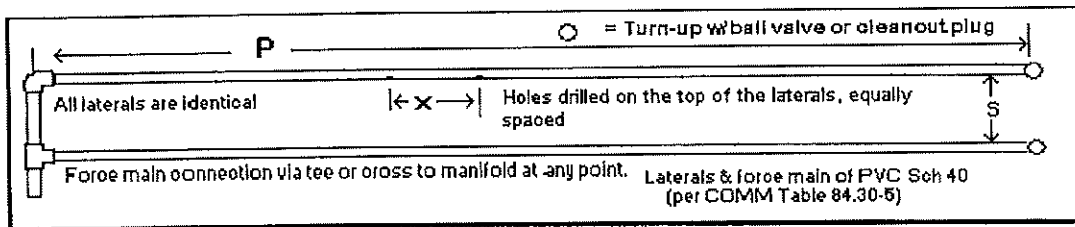
Forcemain

Forcemain Length (ft)	25
Forcemain Diameter (in)	2
Friction Loss (ft)	1.45

Backflow

Highest Point in Distribution System	laterals
Elevation of Highest Point (feet)	104.6

Lateral Layout Diagram

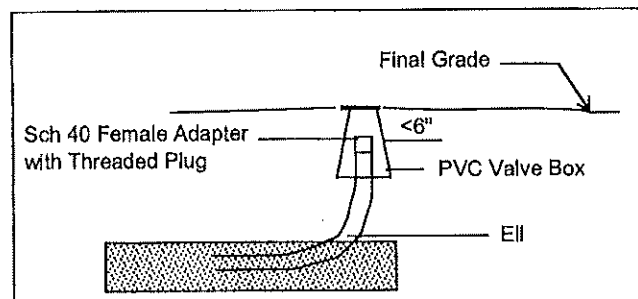


Lateral Length (P) 49 feet

- 1 - Holes are equally spaced on top of lateral, every fifth hole facing down.
- 2 - Last hole next to ell.

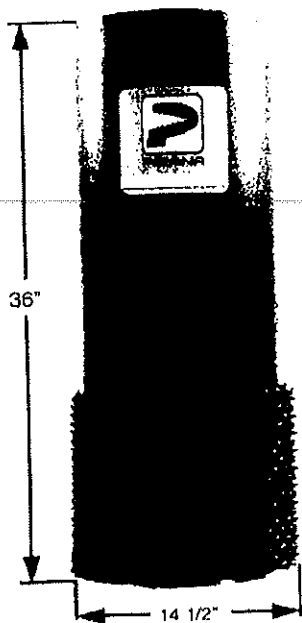
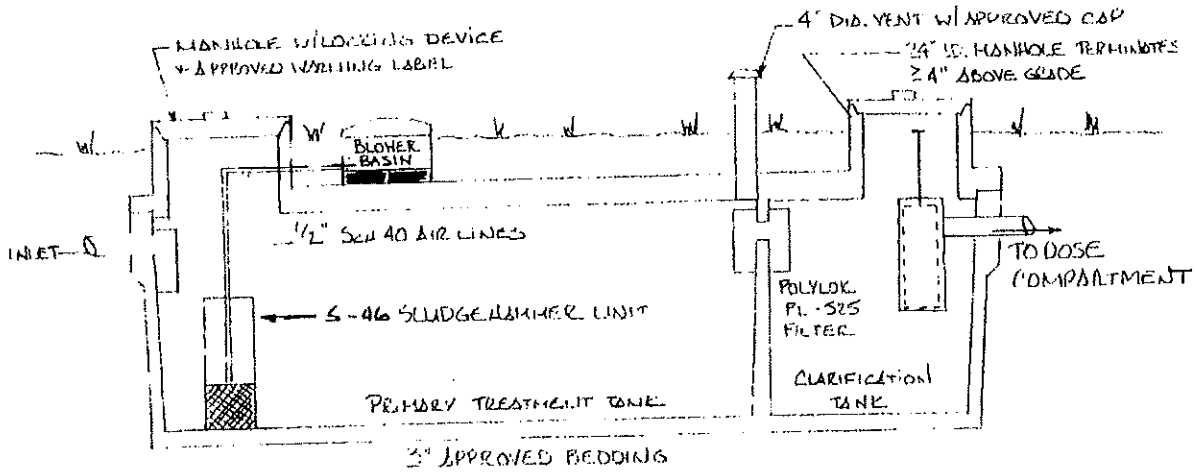
Orifice Spacing (X) 12 in
 Orifice Diameter 5/32 in
 Holes per Pipe 50

Flushing Valve Assembly

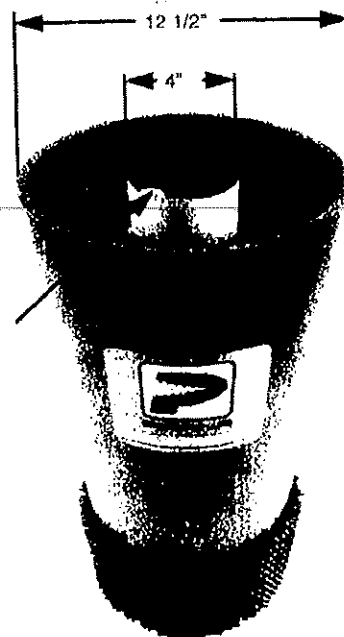


SLUDGEHAMMER TANK CROSS SECTION

Typical SludgeHammer Tank



1/2" Air line





SludgeHammer™

Pirana ABG Inc.
336 S. Division Rd.
Petoskey, MI 49770

Ph: 1.231.348.5866
Toll Free: 1.800.428.3349
Fax: 1.720.834.3102
www.PiranaABG.com



SludgeHammer Specifications

The SludgeHammer represents the first significant advance in Aerobic Bacterial Generator biotechnology since we presented our original Pirana ABG over 5 years ago. During that period Pirana ABG Inc. has installed over 1,000 ABGs. Drawing on this extensive experience coupled with an active R&D program directed by the originator of the ABG concept, Dr. Daniel Wickham, we have dramatically improved on the original with the SludgeHammer.



The SludgeHammer continues to meet UPC code and the IAPMO IGC 180-2003 standard for Aerobic Bacterial Generators.

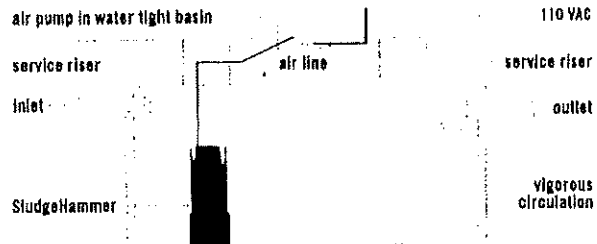
Pirana ABG Inc. provides design consultation and engineering for industrial applications and community scale systems.

Visit www.PiranaABG.com for information on availability in your area, as well as for dealership opportunities.

specifications

	S-86 unit Recommended for larger residences and commercial applications.	S-46 unit Recommended for single-family residences up to 4 bedrooms.
Dimensions:		
Column diameter at top:	12"	12"
Column diameter at base:	15"	15"
Total height:	36"	36"
Electrical Service:	110 V, 60 Hz. - 15 amp.	110 V, 60 Hz. - 15 amp.
Power draw:	60 watts ~ 1 amp	40 watts ~ 0.5 amps
Air delivery rate:	3.5 CFM @ 2.0 psi	1.7 CFM @ 2.0 psi
Liquid mixing rate:	30,000 gpd @ 4 foot depth	22,600 gpd @ 4 foot depth
Fixed film utilization factor:	350 gal./ft ² /day	240 gal./ft ² /day
Organic digestion rate:	3-6 lb/BOD/day	1.5-3.0 lb BOD/day
Minimum depth of tank:	40 inches	40 inches
Maximum depth of tank:	84 inches	84 inches
Single chamber tanks:	Minimum 800 gal. Maximum 2,500 gal.	Minimum 500 gal. Maximum 1,500 gal.
Two chamber tanks:	Minimum 400 gal. in SludgeHammer compartment	Minimum 400 gal. in SludgeHammer compartment
Multi-family or commercial installations:	S-86 Sludgehammers can be installed in multiples with supplemental air diffusers.	
Domestic headworks strength:	5-10 lb/BOD/day for single S-86 with supplemental air.	
Maximum tank volume:	Contact your local dealer for design details.	
High strength loads:		

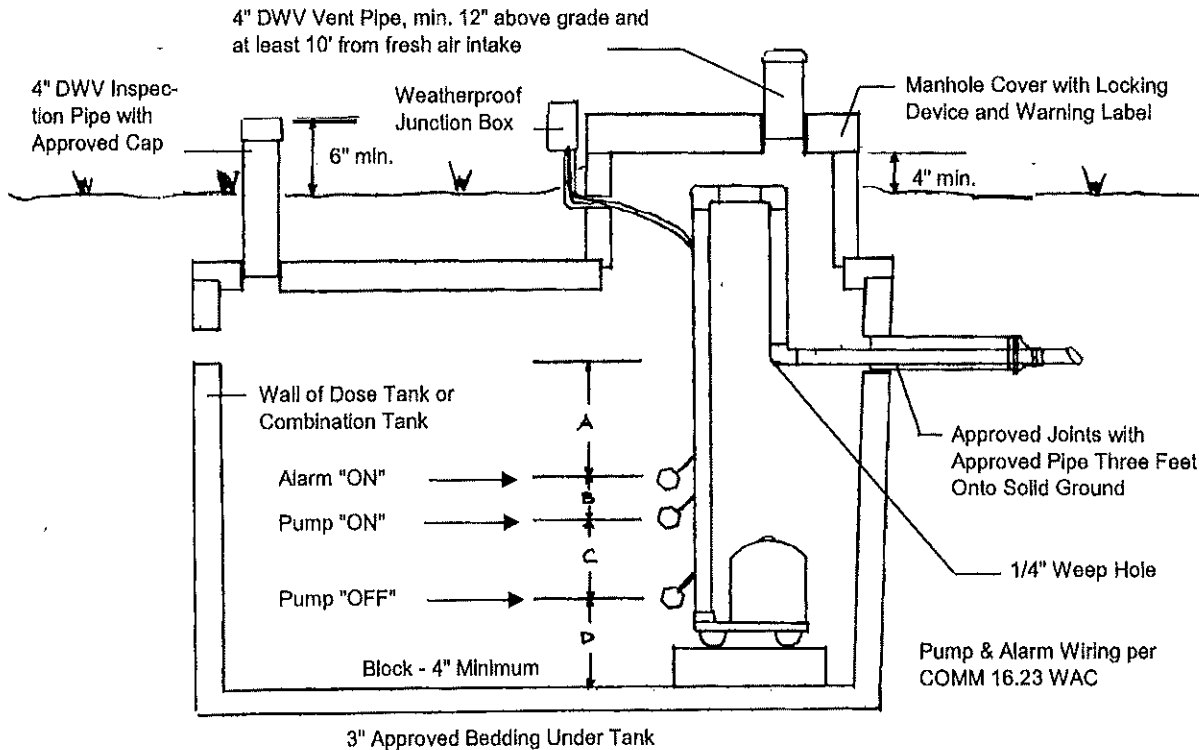
Pirana ABG Inc. recommends installation in tanks providing a minimum 2.5-3.0 day hydraulic retention time.



Dose Tank Cross Section & Specifications

Typical Dose Tank Layout

In combination with State approved treatment tank. Tank construction per Comm 83.20(3) WAC.



Tank Manufacturer:	Wieser Concrete	Maximum Dose:	120.0	124.1
Septic Tank Volume:	768 + 503	Minimum Dose:	79.9	84.0
Dose Tank Volume:	800	Backflow:	4.1	
Dose Tank Capacity:	20.6			

Alarm Manufacturer:	SJ Electro-Systems
Model Number:	101 HW
Switch:	Mercury

Dimensions		
A	27.75	571.7
B	2.00	41.2
C	4.25	87.6
D	4.00	82.4

Pump Manufacturer:	Goulds
Model Number:	PE51
Switch:	Mercury
Lateral Discharge Rate:	54.00

Internal Dose Tank Dimensions	
Length:	64.0
Width:	78.0
Liquid Depth:	38.0

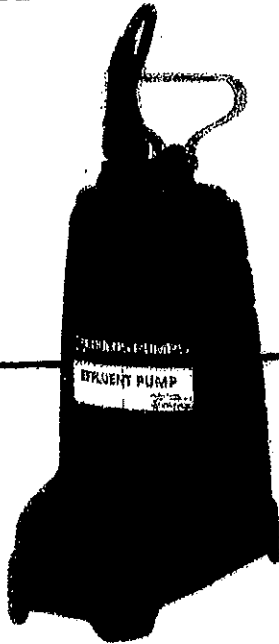
Lateral Elevation:	104.6	Pump Elevation:	96.1	
Vertical Difference Between Pump Off & Distribution Pipe.....			8.50	feet
Minimum Network Supply Pressure.....			4.55	feet
25 Feet of Forcemain x 5.80 ft / 100' Friction Loss.....			1.45	feet
TOTAL DYNAMIC HEAD.....			14.50	feet



Submersible Effluent Pump

MODEL

PE



APPLICATIONS

- Specially designed for the following uses:
- Mound Systems
 - Effluent/Dosing Systems
 - Low Pressure Pipe Systems
 - Basement Draining
 - Heavy Duty Sump/Dewatering

SPECIFICATIONS

- Pump - General:**
- Discharge: 1 1/2" NPT
 - Temperature: 104°F (40°C) maximum, continuous when fully submerged.
 - Solids handling: 1/2" maximum sphere.
 - Automatic models include a float switch.
 - Manual models available.
 - Pumping range: see performance chart or curve.

- PE31 Pump:**
- Maximum capacity: 50 GPM
 - Maximum head: 25' TDH

- PE41 Pump:**
- Maximum capacity: 60 GPM
 - Maximum head: 29' TDH

- PE51 Pump:**
- Maximum capacity: 70 GPM
 - Maximum head: 37' TDH

MOTOR

- General:**
- Single phase
 - 60 Hertz
 - 115 volts
 - Built-in thermal overload protection with automatic reset.
 - Class B insulation.
 - Oil-filled design.
 - High strength carbon steel shaft.

- PE31 Motor:**
- .33 HP, 3000 RPM
 - 12.0 Maximum amps
 - Shaded pole design

- PE41 Motor:**
- .40 HP, 3400 RPM
 - 7.5 Maximum amps
 - PSC design

- PE51 Motor:**
- .50 HP, 3400 RPM
 - 9.5 Maximum amps
 - PSC design

FEATURES

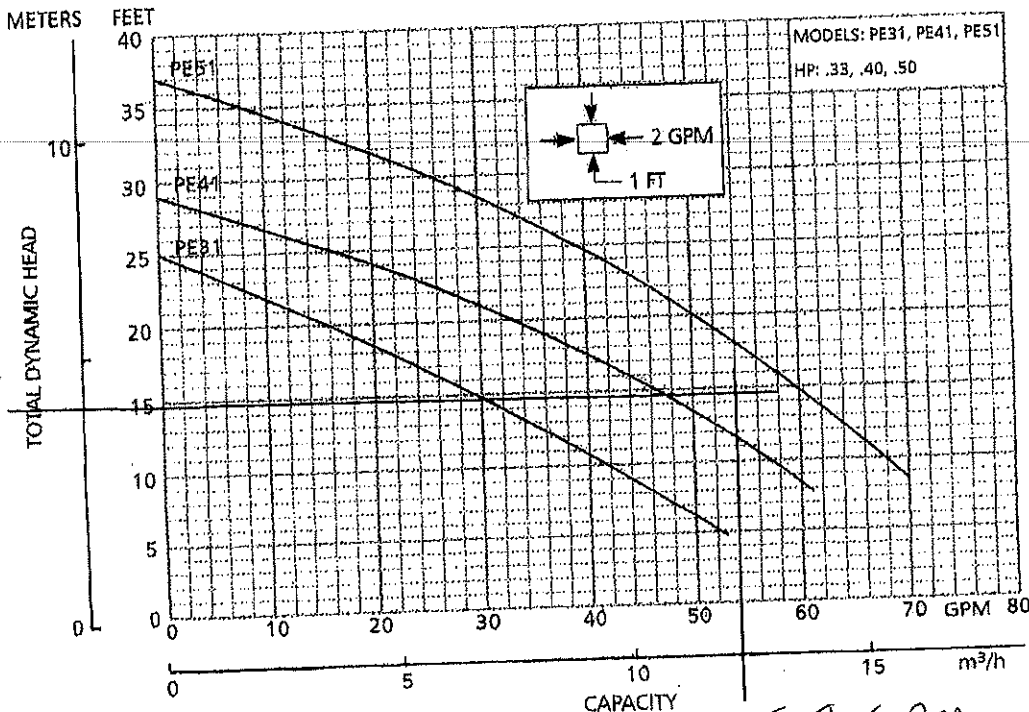
- Corrosion resistant construction.
- Cast iron body.
- Thermoplastic impeller and cover.
- Upper sleeve and lower heavy duty ball bearing construction.
- Motor is permanently lubricated for extended service life.
- Powered for continuous operation.
- All ratings are within the working limits of the motor.
- Quick disconnect power cord, 20' standard length, heavy duty 16/3 SJTW with NEMA 5-15P, three prong, 115 volt grounding plug.
- Complete unit is heavy duty, portable and compact.
- Mechanical seal is carbon, ceramic, BUNA and stainless steel.
- Stainless steel fasteners.

AGENCY LISTINGS



Tested to UL 778 and CSA 22.2 108 Standards
By Canadian Standards Association
File #LR38549

Goulds Pumps is ISO 9001 Registered.



OPERATION AND MAINTENANCE

The owner of this Private Onsite Wastewater Treatment System (POWTS) is responsible for the operation and maintenance of this component. Manitowoc County Planning & Parks Commission, the Department of Commerce, or a POWTS service contractor may make periodic inspections of the components, checking for sludge accumulation in the tanks, condition of electrical components, alarm, dose rate, dose volume and frequency, checking for surface discharge, treated effluent levels, etc.

The owner or owner's agent is required to submit necessary maintenance reports to Manitowoc County or the Department of Commerce.

Routine and Preventative Maintenance

Septic Tank & Dose Tank:

- 1 – The septic tank is to be pumped when the combined sludge and scum volume equals 1/3 of the tank volume. This is normally every two or three years for a home with no garbage disposal (more often *with* a garbage disposal.)
- 2 – The dose tank is to be pumped whenever the septic tank is cleaned. All tanks are to be pumped by a Licensed Pumper and contents disposed of per NR 113 (Dept. of Natural Resources Code.)
- 3 – The effluent filter cartridge is to be removed and cleaned with a hose over the septic tank manhole every 18 months or as often as necessary.

SludgeHammer Units & Blowers:

- 1 – The SludgeHammer units must be inspected every six months during the first two years of operation and annually after that, per the Maintenance Inspection Agreement. Items requiring inspection are the blowers and related piping, effluent filter, pump, controls, alarm system, sludge depth and effluent quality. **The bacteria sack MUST be replaced annually at minimum.**
- 2 – It is critical that the blower unit function continuously. **If the blower is not running, call Madson Tiling & Excavating, Inc. immediately.**
- 3 – If the home is left unoccupied for long periods of time, four weeks or more, contact Madson Tiling & Excavating, Inc.

Mound:

- 1 – The distribution laterals are to be flushed once every three years.
 - a – open the ends of the distribution laterals (turn valve or remove plug);
 - b – override the floats by plugging the pump in direct (the pump must cycle long enough to scour the lines);
 - c – when the water runs clear, the pump and switches are to be properly reconnected;
- 2 – The observation tubes should be inspected for effluent ponding just prior to lateral flushing, every three years.
- 3 – The mound should be inspected for leakage by simple observation and also by walking and feeling for soft, spongy or wet areas particularly at the stonebed and downslope.

General Preventative Maintenance:

- 1 – A good water conservation plan within the house will assure a more efficient, longer lasting system.
 - a – check for leaking fixtures
 - b – spread the wash evenly over the week
 - c – avoid water surges.

2 – Don't flush harmful products. **Prohibited substances** are:

- a – plastic or rubber products
- b – petroleum based products
 - motor oil
 - paint
 - paint thinner
 - gasoline
 - solvents
- c – non-biodegradable products
 - sanitary napkins
 - wipes
 - condoms
 - diapers
 - cat litter
 - cigarette butts
- d – toxic substances
 - pesticides
 - strong disinfectants
 - strong, caustic drain cleaners
 - anything toxic to humans
- e – large amounts of paper products
- f – paper towels and synthetic fiber-reinforced products advertised as having "wet strength"
- g – animal fats
 - bacon grease
 - lard
- h – liquid fabric softeners
- i – water softener waste (from regeneration)
- j – leftover drugs

3 – **Limited-Use Substances** – limited-use substances, in large concentrations, will reduce or stop the treatment process. Generally, a small concentration is defined as being the product's recommended dosage, per the manufacturer's directions. Check the chemical list on the product for the items listed below.

- a – laundry bleach & detergents with bleach
- b – household cleaners containing sodium bactericides such as:
 - pine oil
 - n-alkyl dichlorobenzyl ammonium chloride (detergents & spray cleaners)
 - lye
 - sodium dichlor-s-triazinetrione (scouring powders & automatic dishwasher detergents)
 - ortho-phenylphenol (tub and toilet bowl cleaners)

4 – Some food wastes will not be treated, even if run through a garbage disposal, such as:

- a – animal bones
- b – melon rinds, corn cobs, pits, seeds
- c – eggshells
- d – coffee grounds
- e – any other non-edible waste

5 – **Acceptable Substances** are substances that are considered to be typical domestic wastewater such as human waste, bath and dish water, and edible food waste.

6 – Winter traffic on the mound is not permitted to avoid frost penetration and to minimize compaction.

7 – Checking the mound for water in the observation pipes and for spongy, wet areas can be important for early detection of possible problems. Report water in the observation pipes and wet areas to your installer.

Maintenance must be completed by a Registered POWTS Maintainer, licensed plumber or licensed inspector. Upon completion of maintenance, any necessary forms are to be completed and submitted to the County.

POWTS INSPECTION SERVICE AGREEMENT

It is hereby agreed this 11th day of March, 2010 by and between below Purchaser and Service Provider that in consideration of the payments provided for herein, Service provider will provide the services of a factory-trained representative to perform an inspection of the equipment described below.

Service Provider will prepare a written inspection report after each inspection and provide a copy of the report to the Purchaser and Manitowoc County. This report will contain recommendations for any operation and maintenance deemed appropriate by the inspector.

This agreement does not assume any responsibilities or obligations that are normally the responsibilities of Purchaser and does not extend to cover any costs that may be associated with any recommendations made under this agreement. The Service Provider will supply parts or labor only after authorized by Purchaser.

After the first two years of system operation, inspections will be made at 12-month intervals for the life of the system. Inspections will be billed to the Purchaser based on the Service Providers usual and customary service rates at the time of inspection.

In no event shall the Service Provider be responsible for any special or consequential damages, including, but not limited to, loss of time, injury to person or property or incidental economic loss due to equipment failure or for any other reason whatsoever.

This agreement shall remain in force for a period of two (2) years, beginning at the date of start-up and will automatically renew each year thereafter unless canceled by either party with at least 30 days written notice. This agreement may be cancelled by the Purchaser only if replaced by a service agreement with an authorized service provider for the equipment listed below. Service Provider may delay inspections or cancel this agreement if payment becomes 15 days or more past due.

Periodic Inspections: Four, semi-annual inspections are included in the installation price. Following that two year period, the Purchaser agrees to pay the Service Provider \$225.00 per annual inspection, service rate to be revised biennially. Any laboratory testing of system influent and/or effluent required by Purchaser will be billed at cost plus 15%.

Equipment Covered Under This Agreement

Description	Model No.	Serial Number	Location (if different from Purchaser)
SludgeHammer	S-86		12409 CTH "LS"

Authorized Service Provider:	Purchaser:
Sign: <i>Susan Schambureck</i>	Sign: <i>Karl Klessig</i>
Authorized Providers: Kevin Madson POWTS Maintainer 224232	Print Name: Saxon Sunrise LLC Karl Klessig
Susan Schambureck POWTS Maintainer 227140	Street: 6111 Cleveland Road
Madson Tiling & Excavating, Inc.	City, State, Zip: Cleveland, WI 53015
10503 USH 151 Manitowoc, WI 54220-9774	Phone: 920-699-3360
Phone: 920-758-2784 Fax: 920-758-2781	Fax:
Email: madsonseptic@lakefield.net	E-Mail: saxon1@tds.net
Date: 3/11/10	Date: 3/11/10

Madson Tiling & Excavating
10503 USH 151
Manitowoc, WI 54220

Telephone: 920/758-2781
Fax: 920/758-2781
email: madsonseptic@lakefield.net



Plan I.D. No.

PRIVATE ONSITE WASTEWATER TREATMENT SYSTEM (POWTS) MAINTENANCE

STATE OF WI - MTWC CO
PRESTON JONES REG/DEEDS
RECEIVED FOR RECORD
03/30/2010 2:46:05 PM

POWTS Owner Name and Return Address

Saxon Sunrise LLC 6111 Cleveland Road; Cleveland, WI 53015

11 + 2 Cr

Parcel I.D. Number
002-014-005-002.03

Agreement Date
3 - 11 - 10

Pursuant to Wisconsin Administrative Code Chapter 83.21(2)(C)5... We acknowledge application is being made for the installation of one or more POWTS technologies or methods that requires monitoring and/or maintenance at intervals of less than 12 months on the following property: (Provide legal land description. Use reverse side if additional space is needed.)

Tract 3 of CS in V1 P673 G.L. #1 S. 14, T17N, R23E
12409 CTH "LS"

Components of the POWTS may include any of the following: septic tank, effluent filter, aerobic treatment tank, pump chamber, aerobic treatment unit, intermittent sand filter, recirculating sand filter or drip dispersal unit(s.) A registered POWTS maintainer must complete the required maintenance inspection and any necessary maintenance or repairs. A POWTS that is not maintained in accordance with the approved management plan or as required under s. Comm 83.54(4) shall be considered a human health hazard.

As an inducement to the County of Manitowoc to issue a Sanitary Permit for the above described property, we agree to do the following:

1. Owner agrees to conform to all applicable requirements of Comm 83, Wis Adm. Code relating to maintenance. If owner fails to have the POWTS components inspected and maintained by a registered POWTS maintainer the system shall be considered to be a human health hazard.
2. The owner agrees to maintain a maintenance or service contract with a registered POWTS maintainer or a business utilizing a POWTS maintainer for the POWTS as long as the POWTS is utilized. The maintainer will conduct the technology manufacturer's required inspections and maintenance on the required schedule. Upon completion of the inspection, the owner will be provided with a written report of the inspection results and necessary repairs. It is the owner's responsibility to contract for the necessary repairs. The owner may contract with a different POWTS maintainer at any time, provided notification of such change is provided in writing to the previous POWTS Maintainer and the governmental unit responsible for the regulation of POWTS.
3. Owner agrees that this agreement shall remain in effect for the life of the POWTS or until the governmental unit responsible for the regulation of POWTS certifies that the property is served by a municipal sewer.
4. This agreement shall be binding upon the owner, heirs of the owner, future owner(s) and assignees of the owner.
5. The owner shall submit the agreement to the register of deeds, and the agreement shall be recorded by the register of deeds in a manner which will permit the existence of the agreement to be determined by reference to the property where the POWTS is installed.

Owner(s) Name(s) -- Please Print
Saxon Sunrise LLC
Karl Klessig

Karl Klessig

Subscribed and sworn to before me on this date: 03-11-10

Cordy Zuber

Notarized Owner(s) Signature(s)

Karl Klessig

Notary Public

My commission expires

07-22-12

Drafted by Madson Tiling & Excavating, Inc.

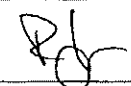
SOIL EVALUATION REPORT

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: Door	
Parcel I.D.: 002-014-005-002.03	
Reviewed by: 	Date: 11/30/09

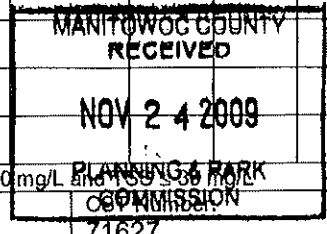
Property Owner: Saxon Sunrise, LLC				Property Location: Govt. Lot 1 1/4 1/4 S 14 T17 N-R 23 E(or) W <input checked="" type="checkbox"/> <input type="checkbox"/>			
Property Owner's Mailing Address: 6111 Cleveland Road				Lot #	Block #	Subd. Name or CSM #	
City: Cleveland	State: WI	Zip Code: 53015	Phone Number: () -	<input type="checkbox"/> City: Centerville	<input type="checkbox"/> Village:	<input checked="" type="checkbox"/> Town:	Nearest Road: 12409 Hwy LS
<input type="checkbox"/> New Construction	Use <input checked="" type="checkbox"/> Residential / Number of bedrooms: X-4			Code derived design flow rate: 450-600 GPD			
<input checked="" type="checkbox"/> Replacement	<input type="checkbox"/> Public or commercial - Describe:						
Parent material: Glacial Till				Flood Plain elevation If applicable: NA ft.			
General comments and recommendations:				~6" of Mound Sand Required above grade Pretreatment Recommended Fill Removed Road Fill with Mound Sand			

11 Boring # Boring Pit Ground surface elev. 103.59 ft. Depth to limiting factor 26 in. Soil Application Rate

Horizon	Depth in.	Dominant Color Munsell	Redox Description Qu. Sz. Cont. Color	Texture	Structure Gr. Sz. Sh.	Consistence	Boundary	Roots	GPD/ft ²	
									Eff#1	Eff#2
Fill	0-8	10YR6/4	(Quarry Wash) mainly	rd - gravel	massive	mfirm	as	#	#	#
A	8-9	10YR3/2	#	LS	sg	loose	as	1vf-f	0.7	1.6
Bs	9-18	10YR4/6	#	LS	sg	loose	cw	1vf	0.7	1.6
CB	18-26	10YR5/4	#	fS-LfS	massive	mfr	cs	1vf	0.5	1.0
C	26-30	10YR6/4	C1D 7.5YR6/6 C2D 10YR6/3	fS-LfS	massive	mfr	#	1vf	0.5	1.0

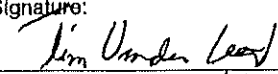
12 Boring # Boring Pit Ground surface elev. 104.06 ft. Depth to limiting factor >27 in. Soil Application Rate

Horizon	Depth in.	Dominant Color Munsell	Redox Description Qu. Sz. Cont. Color	Texture	Structure Gr. Sz. Sh.	Consistence	Boundary	Roots	GPD/ft ²	
									Eff#1	Eff#2
Fill	0-5	10YR6/4	(Quarry Wash) mainly	rd - gravel	massive	mfirm	as	#	#	#
A	5-13	10YR3/2	#	LS	sg	loose	as	1vf-f	0.7	1.6
Bs	13-22	10YR4/6	#	LS	sg	loose	cw	1vf	0.7	1.6
CB	22-27	10YR5/4	#	fS-LfS	massive	mfr	cs	1vf	0.5	1.0



* 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): Tim Vander Leest	Signature: 	Date Evaluation Conducted: 9/19/2008 & 11/19/2009	Telephone Number: (920) 743 - 4708
Address: 824 Egg Harbor Road - Sturgeon Bay, WI 54235		71627	

Property Owner:

Parcel ID #:

13 Boring # Boring Pit Ground surface elev. 103.81 ft. Depth to limiting factor 30 in. Soil Application Rate

Horizon	Depth In.	Dominant Color Munsell	Redox Description Qu. Sz. Cont. Color	Texture	Structure Gr. Sz. Sh.	Consistence	Boundary	Roots	GPD/ft ²	
									Eff#1	Eff#2
Fill	0-8	10YR6/4	(Quarry Wash) mainly	rd - gravel	massive	mfirm	as	#	#	#
A	8-10	10YR3/2	#	LS	sg	loose	cb	1vf-f	0.7	1.6
Bs	10-18	10YR4/6	#	LS	sg	loose	cw	1vf	0.7	1.6
CB	18-27	10YR5/4	#	fS-LfS	massive	mfr	cs	1vf	0.5	1.0
C	27-30	10YR6/4	C1D 7.5YR6/6 C2D 10YR6/3	LfS	massive	mfr	#	1vf	0.5	1.0

14 Boring # Boring Pit Ground surface elev. 103.83 ft. Depth to limiting factor >26 in. Soil Application Rate

Horizon	Depth In.	Dominant Color Munsell	Redox Description Qu. Sz. Cont. Color	Texture	Structure Gr. Sz. Sh.	Consistence	Boundary	Roots	GPD/ft ²	
									Eff#1	Eff#2
A	0-9	10YR3/2	#	LS	sg	loose	as	1vf-f	0.7	1.6
Bs	9-18	10YR4/6	#	LS	sg	loose	cw	1vf	0.7	1.6
CB	18-26	10YR5/4	#	LfS	massive	mfr	#	#	0.5	1.0

5 Boring # Boring Pit Ground surface elev. ft. Depth to limiting factor in. Soil Application Rate

Horizon	Depth In.	Dominant Color Munsell	Redox Description Qu. Sz. Cont. Color	Texture	Structure Gr. Sz. Sh.	Consistence	Boundary	Roots	GPD/ft ²	
									Eff#1	Eff#2

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

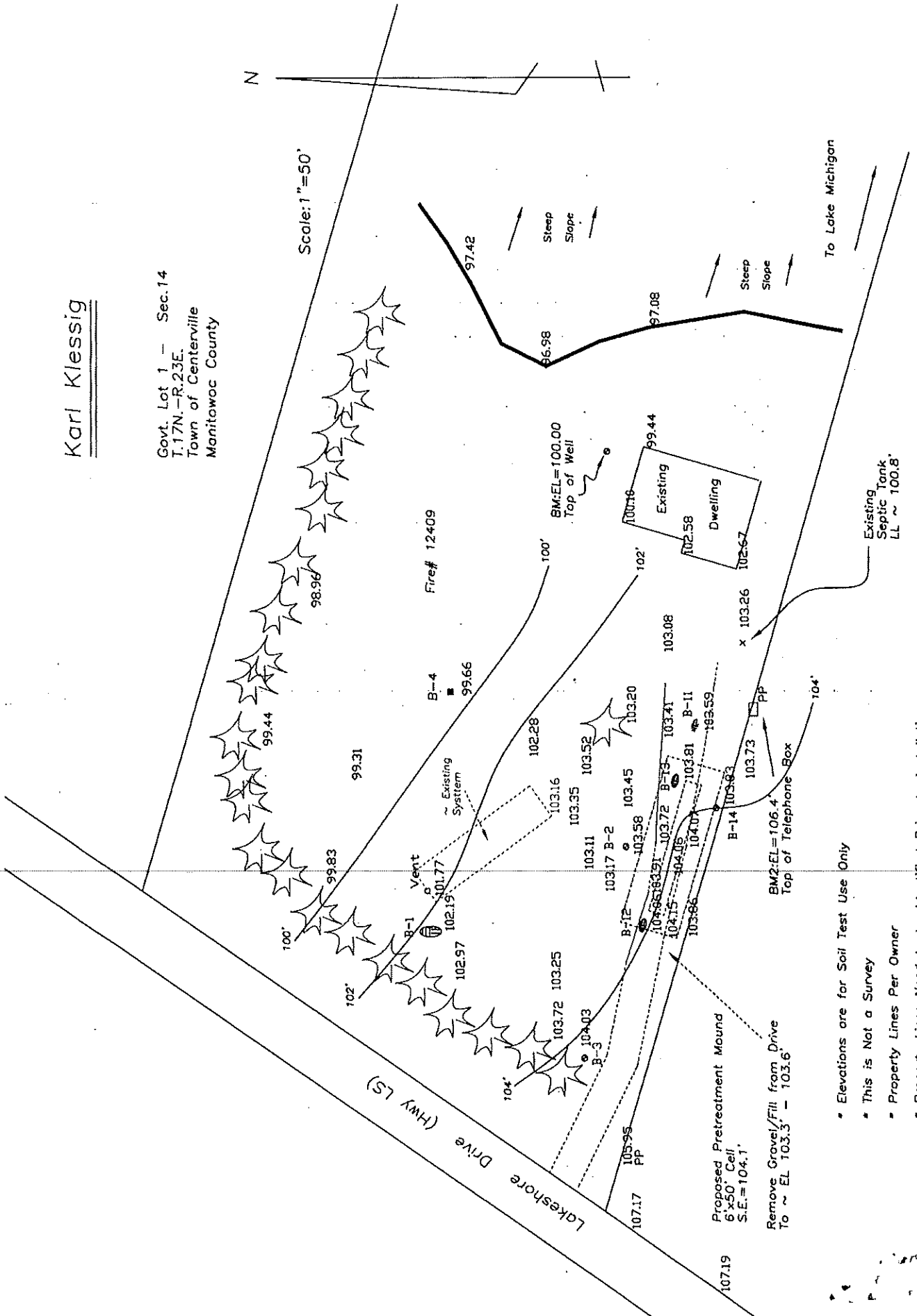
* Effluent # 2 = BOD₅ ≤ 30 mg/L and TSS ≤ 30 mg/L

The Department of Commerce is an equal opportunity service provider and employer. If you need assistance to access services or need material in an alternate format, please contact the department at 608-266-3151 or TTY 608-264-8777.

Karl Klessig

Govt. Lot 1 - Sec. 14
T. 17N. - R. 23E.
Town of Centerville
Manitowoc County

Scale: 1" = 50'



- * Elevations are for Soil Test Use Only
- * This is Not a Survey
- * Property Lines Per Owner
- * Property Lines Need to be Identified Prior to Installation

Proposed Pretreatment Mound
6' x 50' Cell
S.E. = 104.1'

Remove Gravel/Fill from Drive
To ~ EL 103.5' - 103.6'

BM2: EL = 106.4
Top of Telephone Box

Existing Septic Tank
LL ~ 100.8'

Existing Dwelling

BM: EL = 100.00
Top of Well

Fire# 12409

B-4
Existing System

B-1
Vent

Lakeshore Drive (HWY LS)

To Lake Michigan

N

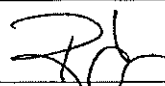
SOIL EVALUATION REPORT

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, a. 15.04 (1) (m)).

County: Door	
Parcel I.D.: 002-014-005-002.03	
Reviewed by: 	Date: 5/01/10

Property Owner: Saxon Sunrise, LLC				Property Location: Govt. Lot 1 1/4 1/4 S 14 T17 N-R 23 E (or) W			
Property Owner's Mailing Address: 6111 Cleveland Road				Lot #	Block #	Subd. Name or CSM #	
City: Cleveland	State: WI	Zip Code: 53015	Phone Number: () -	<input type="checkbox"/> City: <input type="checkbox"/> Village: <input checked="" type="checkbox"/> Town: Centerville	Nearest Road: 12409 Hwy LS		

<input type="checkbox"/> New Construction	Use <input checked="" type="checkbox"/> Residential / Number of bedrooms: 3-4	Code derived design flow rate: 450-600 GPD
<input checked="" type="checkbox"/> Replacement	<input type="checkbox"/> Public or commercial - Describe:	

Parent material: Glacial Till Flood Plain elevation if applicable: NA ft.

General comments and recommendations: ~6" of Mound Sand Required

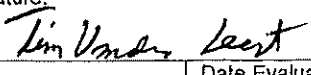
1 Boring # Boring Pit Ground surface elev. 102.19 ft. Depth to limiting factor 36 in. Soil Application Rate

Horizon	Depth in.	Dominant Color Munsell	Redox Description Qu. Sz. Cont. Color	Texture	Structure Gr. Sz. Sh.	Consistence	Boundary	Roots	GPD/ft ²	
									Eff#1	Eff#2
A	0-12	10YR3/2	#	LS	sg	loose	as	lvf-f	0.7	1.6
Bs	12-22	10YR4/6	#	LS	sg	loose	cw	lvf	0.7	1.6
CB	22-36	10YR4/4,5/4	#	LfS	massive	mfr	gw	lvf	0.5	1.0
C	36-78	10YR6/4	C1D 7.5YR6/6 C2D 10YR6/3	fS-LfS	massive	mfr	#	lvf	0.5	1.0

2 Boring # Boring Pit Ground surface elev. 103.58 ft. Depth to limiting factor 30 in. Soil Application Rate

Horizon	Depth in.	Dominant Color Munsell	Redox Description Qu. Sz. Cont. Color	Texture	Structure Gr. Sz. Sh.	Consistence	Boundary	Roots	GPD/ft ²	
									Eff#1	Eff#2
A	0-12	10YR3/2	#	LS	sg	loose	as	lvf-f	0.7	1.6
Bs	12-21	10YR4/6	#	LS	sg	loose	cw	lvf	0.7	1.6
CB	21-30	10YR4/4,5/4	#	LfS	massive	mfr	gw	lvf	0.5	1.0
C	30-52	10YR6/4	C1D 7.5YR6/6 C2D 10YR6/3	fS-LfS	massive	mfr	#	lvf	0.5	1.0

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

CST Name (Please Print): Tim Vander Leest	Signature: 	RECEIVED MAR 30 2010 PLANNING & PARK COMMISSION	CST Number: 71627
Address: 824 Egg Harbor Road - Sturgeon Bay, WI 54235		Date Evaluation Conducted: 9/19/2008	Telephone Number: (920) 743 - 4708

Property Owner:

Parcel ID #:

3

Boring #

Boring

Pit Ground surface elev. 104.03 ft.

Depth to limiting factor 30 in. Soil Application Rate

Horizon	Depth in.	Dominant Color Munsell	Redox Description Qu. Sz. Cont. Color	Texture	Structure Gr. Sz. Sh.	Consistence	Boundary	Roots	GPD/ft ²	
									Eff#1	Eff#2
A	0-12	10YR3/2	#	LS	sg	loose	as	lvf-f	0.7	1.6
Bs	12-20	10YR4/6	#	LS	sg	loose	cw	lvf	0.7	1.6
CB	20-30	10YR4/4,5/4	#	LfS	massive	mfr	gw	lvf	0.5	1.0
C	30-44	10YR6/4	C1D 7.5YR6/6 C2D 10YR6/3	fS-LfS	massive	mfr	#	lvf	0.5	1.0

4

Boring #

Boring

Pit Ground surface elev. 102.19 ft.

Depth to limiting factor 22 in.

Soil Application Rate

Horizon	Depth in.	Dominant Color Munsell	Redox Description Qu. Sz. Cont. Color	Texture	Structure Gr. Sz. Sh.	Consistence	Boundary	Roots	GPD/ft ²	
									Eff#1	Eff#2
A	0-9	10YR3/2	#	LS	sg	loose	as	lvf-f	0.7	1.6
Bs	9-16	10YR4/6	#	LS	sg	loose	cw	lvf	0.7	1.6
CB	16-22	10YR4/4,5/4	#	LfS	massive	mfr	gw	lvf	0.5	1.0
C	22-40	10YR6/4	C1D 7.5YR6/6 C2D 10YR6/3	fS-LfS	massive	mfr	#	lvf	0.5	1.0

5

Boring #

Boring

Pit Ground surface elev. ft.

Depth to limiting factor in.

Soil Application Rate

Horizon	Depth in.	Dominant Color Munsell	Redox Description Qu. Sz. Cont. Color	Texture	Structure Gr. Sz. Sh.	Consistence	Boundary	Roots	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

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