



**Manitowoc County
Private Onsite Wastewater Treatment System
Inspection Report**

County Permit No:
S-147-22

State Permit No:
640441

State Plan Transaction
ID#: **2022026**

Parcel Tax No:
016-011-004-003.00

GENERAL INFORMATION

Personal information you provide may be used for secondary purposes [Privacy Law, s. 15.04 (1)(m)]

Permit Holder's Name: Amanda & Andrew Jurss		Town of: Schleswig
Type of System: <input type="checkbox"/> New <input checked="" type="checkbox"/> Replacement <input type="checkbox"/> Reconnect <input type="checkbox"/> Tank Replacement Only		
Mound: <input type="checkbox"/> <24" <input type="checkbox"/> >24"; <input type="checkbox"/> At-Grade <input checked="" type="checkbox"/> Holding Tank <input type="checkbox"/> In ground <input type="checkbox"/> In ground Pressure		
BM Description: Top of well	BM 2 Description:	

Building Sewer

Length: >30' ☒ Y ☐ N Insulated: ☒ Y ☐ N Cleanout: ☐ Y ☐ N/A

Tank Information ☒ Same as Plans ☐ Revised (change below)

Type	Manufacturer	Capacity
Septic		
Dosing		
Aeration		
Holding	Ledgeview	1 @ 2000
Filter		
Chained and Locked <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (To be locked per code)		Bedding: <input type="checkbox"/> Sand <input checked="" type="checkbox"/> Gravel <input type="checkbox"/> None
Old Tank Abandoned Per SPS 383? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		

Tank Setback Information

Tank To	P/L	Well	BLDG.	Vent/ air intake	Road
Septic					N/A
Dosing					N/A
Aeration					N/A
Holding	2'	26'	5'	10'+	2'

Pump/Siphon Information

Manufacturer	Demand		
Model No.	GPM		
Lift	Fric. Loss	Sys. Head	TDH
Forcemain	Length:	Dia:	Dist. To Well:

Dispersal Cell Information

Dimensions	Width	Length	No. of Cells
Cell to:	P/L	Bldg.	Well
			OHWM
			Pool
Leaching Chambers	Manufacturer:	Model #	# of Units.

Distribution Information

Header/Manifold	Distribution Pipe(s): _____ Lateral(s)
Length _____ Dia _____	Length _____ Dia _____ Spac _____

Distribution Information

Hole Size:	Hole Spacing:	Observation Pipes: <input type="checkbox"/> Yes <input type="checkbox"/> No	Vented <input type="checkbox"/> Yes <input type="checkbox"/> No
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Soil Information

System covered? <input type="checkbox"/> Yes <input type="checkbox"/> No (To be installed per Code by Installer.)	Seeded/Sodded <input type="checkbox"/> Yes <input type="checkbox"/> No	Mulched <input type="checkbox"/> Yes <input type="checkbox"/> No
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Site Plan Revision? ☐ Yes ☐ No
Plan Revision Needed? ☐ Yes ☐ No
Reason?

Comments: Only 1 tank installed. Revision shown on plan. ☐ well to be located per SPS 383 plan originally called for 2 tanks. However once on site, the neighbors well would only be 19 feet from the closest tank. Therefore, the installer moved the tank further west away from the well and the owner will only have one holding tank.

Installer's Signature

10 / 11 / 22
Date

[Signature]
Powts Inspector's Signature

637678

Certification No.



Industry Services Division
4822 Madison Yards Way
Madison, WI 53705
P.O. Box 7162
Madison, WI 53707-7162

County
Manitowoc

Sanitary Permit Number (to be filled in by Co.)

640441 S-147-22

Sanitary Permit Application

In accordance with SPS 383.21(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 Safety and Professional Services. 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

2022026

Project Address (if different than mailing address)

11421 Sy Lake Ln

I. Application Information - Please Print All Information

Property Owner's Name

Amanda & Andrew Jurss

Parcel #

16-011-004-003.00

Property Owner's Mailing Address

1317 Castle Ave.

Property Location

Govt. Lot

SE $\frac{1}{4}$, NE $\frac{1}{4}$, Section 11

City, State

Sheboygan, WI

Zip Code

53081

Phone Number

(920) 946-5043

II. Type of Building (check all that apply)

☒ 1 or 2 Family Dwelling - Number of Bedrooms 2

☐ Public/Commercial - Describe Use _____

☐ State Owned - Describe Use _____

Lot #

Block #

CSM Number

T 17 N R 21 E or W

Subdivision Name

☐ City of _____

☐ Village of _____

☒ Town of Schleswig

III. Type of POWTS Permit: (Check either "New" or "Replacement" and other applicable on line A. Check one box on line B. Complete line C if applicable.)

A.	<input type="checkbox"/> New System	<input checked="" type="checkbox"/> Replacement System	<input type="checkbox"/> Other Modification to Existing System (explain) _____	<input type="checkbox"/> Additional Pretreatment Unit (explain) _____		
B.	<input checked="" type="checkbox"/> Holding Tank	<input type="checkbox"/> In-Ground (conventional)	<input type="checkbox"/> At-Grade	<input type="checkbox"/> Mound	<input type="checkbox"/> Individual Site Design	<input type="checkbox"/> Other Type (explain) _____
C.	<input type="checkbox"/> Renewal Before Expiration	<input type="checkbox"/> Revision	<input type="checkbox"/> Change of Plumber	<input type="checkbox"/> Transfer to New Owner	List Previous Permit Number and Date Issued s-1963-88 11/07/1988	

IV. Dispersal/Treatment Area and Tank Information:

Design Flow (gpd)	Design Soil Application Rate (gpd/sf)	Dispersal Area Required (sf)	Dispersal Area Proposed (sf)	System Elevation						
200 300										
Tank Information	Capacity in Gallons		Total Gallons	# of Units	Manufacturer	Prefab Concrete	Site Constructed	Steel	Fiber Glass	Plastic
	New Tanks	Existing Tanks								
Septic or Holding Tank	2000/2000		2 4000	1 2	Ledgeview	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dosing Chamber						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

Plumber's Name (Print)	Plumber's Signature	MP/MPRS Number	Business Phone Number
Damon Huibregtse	<i>Damon Huibregtse</i>	262476	(920) 564-3322
Plumber's Address (Street, City, State, Zip Code)			980-3606
P.O. Box 248, Hingham, WI 53031			

VI. County/Department Use Only

<input checked="" type="checkbox"/> Approved	<input type="checkbox"/> Disapproved	Permit Fee	Date Issued	Issuing Agent Signature
<input type="checkbox"/> Owner Given Reason for Denial		\$ 572.00	9-30-22	<i>Kaile Boeckelman</i>

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 in size

MANITOWOC COUNTY
RECEIVED

SEP 30 2022

PLANNING & PARK
COMMISSION



Planning & Zoning Department

Manitowoc County Office Complex • 4319 Expo Drive, P.O. Box 935 • Manitowoc WI 54221-0935
Phone: 920.683.4185

Sanitary Permit Number: 646441 S-141-22

Permit Issue Date: 9/30/22

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 Zoning Department Office a certification form (to be provided by Manitowoc County Planning and Zoning Department) every three 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 government 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 935

Manitowoc, WI 54221-0935

Planning and Zoning

920-683-4185

website: www.co.manitowoc.wi.us

September 30, 2022

OWNER'S NAME: AMANDA & ANDREW JURSS

LEGAL: SE ¼, NE ¼, S.11 T17N-R21E

MUNICIPALITY: TOWN OF SCHLESWIG

SYSTEM TYPE: HOLDING TANK

PLUMBER: DAMON HUIBREGTSE

PLAN I.D.: 2022026

FEE: \$124.00

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 "Holding Tank Component Manual for Private Onsite Wastewater Systems" (Version 2.1); (May 2022-2027).

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 & Professional Service or Manitowoc County Planning and Zoning 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,


Kaila Boeckman

DIRKSE & HUIBREGTSE, INC.
W4455 Center Street
P.O. Box 248
Hingham, WI 53031
920-564-3322

INDEX SHEET

Property Owner(s) Name: Amanda & Andrew Jurss
Address: 1317 Castle Ave.
Sheboygan, WI 53081
Phone #: (920) 946-5043

Project Name: Holding Tank Replacement

Project Location-

Street Address/Nearest Road: 11421 Sy Lake Ln, Kiel, WI 53042

Legal Description: SE ¼ NE 1/4 Sec 11, T17N, R21E
Municipality/Township: Schleswig
County: Manitowoc

Contents: Page 1-Index Sheet
Page 2-Plot Plan of Property
Page 3-Cross-section of Holding Tank
Page 4-Ballast Calculation
Page 5-Management User

Name: Damon Huibregtse

Signed: *Damon Huibregtse*

MPRS 2624763

Date: *9/30/22*

Return by: Mail E-mail

PRIVATE WASTEWATER TRI

CONDITIONALLY

DEPARTMENT OF
AND PROFESSIONAL
MANITOWOC COUNTY

Kyle Boeckman
SIGNATURE

Pump + remove
existing HT +
replace with
1 (X) 2000 gal.
ledger view conc.
H.T.'s

P. 205
Damon Hinchey
MPRS # 262476
9/30/22

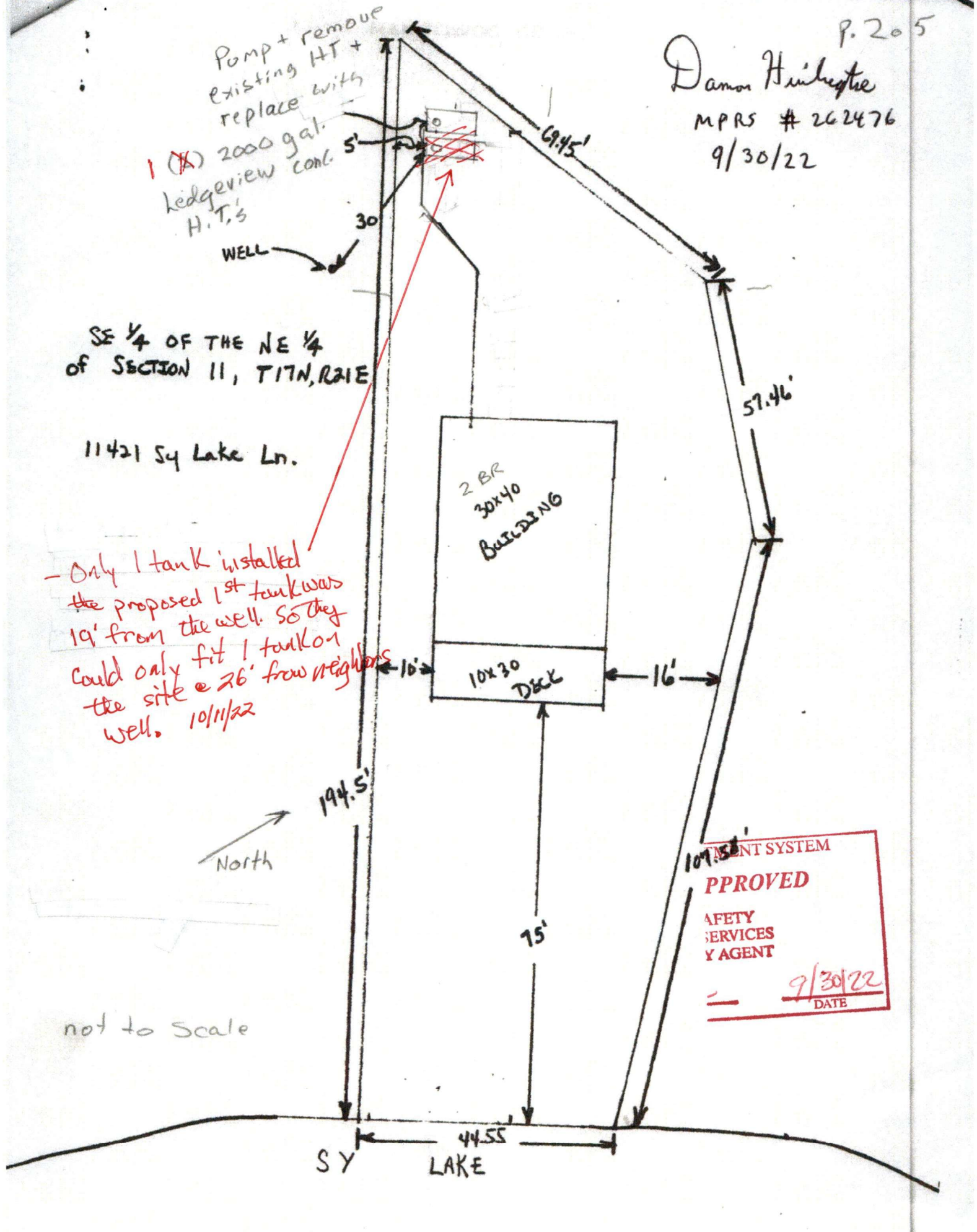
SE 1/4 OF THE NE 1/4
OF SECTION 11, T17N, R21E

11421 Sy Lake Ln.

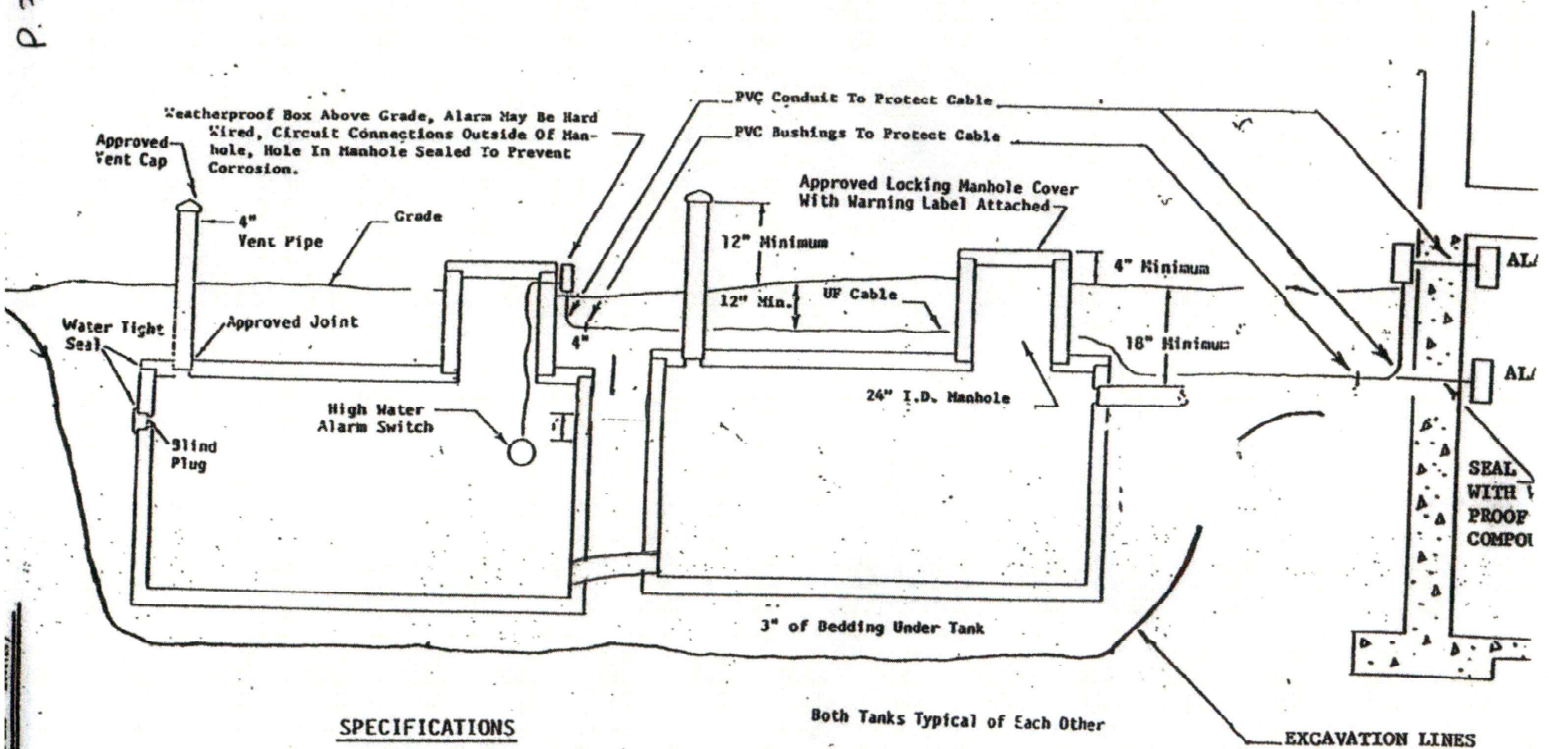
- Only 1 tank installed
the proposed 1st tank was
19' from the well. So they
could only fit 1 tank on
the site @ 26' from neighbors
well. 10/11/22

North

not to scale



MENT SYSTEM
PPROVED
AFETY
SERVICES
Y AGENT
9/30/22
DATE



SPECIFICATIONS

TANK New ☒ Existing
 Manufacturer: LEDGEVIEW
 Tank Size: 2000 Gallons ≈ 4000 gal

ALARM Manufacturer: RADOMBUS
 Model Number: 101 HW
 Switch Type: MECHANICAL

BALLAST CALCULATIONS FOR LEDGEVIEW PRECAST CONCRETE INC.
WITH TRAFFIC LID
2000 GALLON HOLDING TANK

TANK DIMENSIONS = 11.92'L x 6.5'W x 5.17'H = 400.57 cubic feet

400.57 x 1.1 = 440.63 x 62.40 = 27,495 pounds of total displacement

27,495 pounds minus 16,000 pounds (weight of tank and lid) =

11,495 pounds total ballast required.

Weight of 1 cubic foot of back fill material per D.O.C. = 110 psf or

710 pounds per inch of depth on tank lid. *11,495 pounds*
traffic lid 1500 lbs more than std lid so 11495-1500 = 9995
9995 pounds divided by 710 pounds per inch = 14.08

TOTAL DEPTH OF BACKFILL REQUIRED = 14.08 INCHES

HOLDING TANK MANAGEMENT/USER PLAN
FOR AMANDA & ANDREW JURSS

This Private Onsite Wastewater Treatment System (POWTS) has been designed, and is to be installed and maintained according to SPS 383, Wis. Admin. Code, the Holding Tank Component Manual for Private Onsite Wastewater Treatment System (SBD-10855P(N.03/07) and Manitowoc County Ordinance.

1. This POWTS has been designed to accommodate a maximum daily flow of 200 GPD.
2. The owner of this POWTS is responsible for system operation and maintenance, including all provisions of the Holding Tank Servicing Contract and Maintenance Agreements. All Components of this system are shown on the scaled plot plan.
3. Local Health Authority: Manitowoc County Planning & Parks, 920-683-4185
4. POWTS installer is Dirkse & Huibregtse LLC, W4455 Center Street, P.O. Box 248, Hingham, WI 53031, phone #920-564-3322.
5. Each time the wastewater in the tank reaches 90% of the tank(s) capacity or a level of 12" below the inlet (at which time the alarm will activate), the pumper listed in the current Servicing Contract must be called to empty the tank contents and dispose of them in accordance with NR 113, Wis. Adm. Code.
6. A good water conservation plan within the house will insure the longest possible time until the holding tank will need to be pumped.
7. Holding tank shall be cleaned every time the alarm bell sounds. We advise the holding tank pumper to visually inspect the tank at each pumping and inform the homeowner of any abnormalities. We advise that once every three years the tank be inspected to insure it remains water tight.
8. In the event that this POWTS fails and cannot be repaired, a code compliant replacement holding tank may be installed (a new sanitary permit is required for such a replacement).

LEDGEVIEW PRECAST CONCRETE INC. TANK BALLAST CALCULATIONS

CAPACITY	LENGTH	WIDTH	HEIGHT	TOTAL CUBIC FEET	TOTAL DISPLACEMENT	WEIGHT OF TANK AND LID	BALLAST REQUIRED	WEIGHT PER INCH OF BACKFILL	INCHES OF BACKFILL REQUIRED
800 GAL.	7.58 FEET	4.83 FEET	4.75 FEET	173.9	11,937 LBS.	6,600 LBS.	5,337 LBS.	335.6 LBS.	15.9
1000 GAL.	8.16 FEET	5.66 FEET	4.66 FEET	215.22	14,773 LBS.	8,000 LBS.	6,773 LBS.	423.36 LBS.	16
1000 Gal. 2 - Comp.	7.50 FEET	6.50 FEET	4.58 FEET	223.28	15,326 LBS.	9500 LBS.	5,826 LBS.	446.88	13.04
1260 GAL.	8.16 FEET	6.50 FEET	5.16 FEET	273.68	18,786 LBS.	10,000 LBS.	8786 LBS.	486.20 LBS.	18.07
1260 GAL. 2 - Comp.	8.16 FEET	6.50 FEET	5.16 FEET	273.68	18,786 LBS.	11,000 LBS.	7,786 LBS.	486.20 LBS.	16.01
1500 GAL. SINGLE	12.08 FEET	5.66 FEET	4.66 FEET	318.61	21,869 LBS.	11,500 LBS.	10,369 LBS.	626.75 LBS.	16.54
1500 GAL. 2-COMP.	12.08 FEET	5.66 FEET	4.66 FEET	318.61	21,869 LBS.	12,000 LBS.	9,869 LBS.	626.75 LBS.	15.75
1650 GAL. SINGLE	12.08 FEET	6.50 FEET	4.58 FEET	359.62	24,684 LBS.	16,000 LBS.	8,684 LBS.	719.76 LBS.	12.07
1650 GAL. 2-COMP.	12.08 FEET	6.50 FEET	4.58 FEET	359.62	24,684 LBS.	16,500 LBS.	8,184 LBS.	719.76 LBS.	11.37
1650 GAL. 3-COMP.	12.08 FEET	6.50 FEET	4.58 FEET	359.62	24,684 LBS.	17,000 LBS.	7,684 LBS.	719.76 LBS.	10.68
2000 GAL. SINGLE	11.92 FEET	6.50 FEET	5.17 FEET	400.57	27,495 LBS.	16,000 LBS.	11,495 LBS.	710.00 LBS.	16.19
2000 GAL. 2-COMP.	11.92 FEET	6.50 FEET	5.17 FEET	400.57	27,495 LBS.	17,000 LBS.	10,495 LBS.	710.00 LBS.	14.78
2000 GAL. 3-COMP.	12.58 FEET	6.50 FEET	5.41 FEET	442.37	30,364 LBS.	18,000 LBS.	12,364 LBS.	749.55 LBS.	16.5

DISPLACEMENT IS DETERMINED BY MULTIPLYING CUBIC FEET BY 1.1 (safety factor)
 NEXT MUTIPLY THE SUM BY 62.40 (weight of 1 cubic foot of water) = TOTAL DISPLACEMENT

N6672 County Road UU
Ford du Lac, WI 54837



Phone (920) 921-2530
Fax (920) 921-5870

Document No. 648864	HOLDING TANK AGREEMENT	This space reserved for recording data RECEIVED FOR RECORD 1988 OCT 24 PM 12:33 DEPT. OF LAND RECORDS
Agreement Date 9/12/88	This agreement is made between the	
County of Local Governmental Unit MANITOWOC COUNTY (Called Municipality below)	Holding Tank(s) Owner(s) Andrew & Marjorie Giesen 2458 West Mark Dr SHEBOYGAN WI 53083	
We acknowledge that application is being made for the installation of (a) holding tank(s) on the following property. (Provide legal land description:) SE 1/4 NE 1/4 S11 T17N R21E TOWN OF SCHLESWIG		
		Return To Grant 2458 West Mark Dr. Sheboygan 53083 H. Cochen

or that continued use of the existing premises requires that a holding tank be installed on the property for the purpose of proper containment of sewage. Also, the property cannot now be served by a municipal sewer, or any other type of private sewage system as permitted under Ch. ILHR 83, Wis. Adm. Code, or Ch. 145, Stats.

As an inducement to the County of MANITOWOC to issue a sanitary permit for the above described property, we agree to the following:

- Owner agrees to conform to all applicable requirements of Ch. ILHR 83, Wis. Adm. Code relating to holding tanks. If the owner fails to have the holding tank properly serviced in response to orders issued by the municipality to prevent or abate a nuisance as described in ss. 146.13 and 146.14, Stats. the municipality may enter upon the property and service the tank or cause to have the tank serviced and charge the owner by placing the charges on the tax bill as a special assessment for current services rendered. The charges will be assessed as prescribed by s. 66.60, Stats.
- Owner agrees to pay all charges and costs incurred by the municipality for inspection, pumping, hauling or otherwise servicing and maintaining the holding tank in such a manner as to prevent or abate any nuisance or health hazard caused by the holding tank. The municipality shall notify the owner of any costs which shall be paid by the owner within thirty (30) days from the date of notice. In the event the owner does not pay the costs within thirty (30) days, the owner specifically agrees that all of the costs and charges may be placed on the tax roll as a special assessment for the abatement of a nuisance, and the tax shall be collected as provided by law.
- The owner, except as provided by s. 146.20 (3) (d), Stats., agrees to contract with a person who is licensed under Ch. NR 113, Wis. Adm. Code to have the holding tank serviced and to file a copy of the contract or the owner's registration with the municipality and with the county. The owner further agrees to file a copy of any changes to the service contract or a copy of a new service contract with the municipality and the county within ten (10) business days from the date of change to the service contract.
- The owner agrees to contract with a person licensed under Ch. NR 113, Wis. Adm. Code who shall submit to the municipality and to the county a report in accord with s. ILHR 83.18 (4) (a) 2., Wis. Adm. Code for the servicing on a semiannual basis. In the case of registration under s. 146.20 (3) (d), Stats., the owner shall submit the report to the municipality and the county.
- This agreement will remain in effect only until the local governmental unit responsible for the regulation of private sewage systems certifies that the property is served by either a municipal sewer or a soil absorption system that complies with Ch. ILHR 83, Wis. Adm. Code. In addition, this agreement may be cancelled by executing and recording said certification with reference to this agreement in such manner which will permit the existence of the certification to be determined by reference to the property.
- This agreement shall be binding upon the owner, the heirs of the owner and assignees of the owner. 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 holding tank is installed.

Owner(s) Name(s) (Print) Andrew Giesen	Owner(s) Signature(s) <i>Andrew Giesen</i>	Subscribed and sworn to before me on this date: 9-12-88 <i>Jerome Kalle</i> <i>Jerome Kalle</i> Notary Public
Municipal Official Name (Print) MARJORIE E. GIESEN	Municipal Official Signature <i>Marjorie E. Giesen</i>	
Municipal Official Title (Print) TOWN SCHLESWIG	Melvin Wack	My commission expires: 5-07-89

HOLDING TANK SERVICING CONTRACT

This contract is made between the

Holding Tank Owner(s) Name(s) and Amanda Jurs, Andrew Jurs
 Pumpers Name Maritime Liquid Waste Transport LLC
 We acknowledge the installation of (e) holding tank(s) on the following property (Provide legal description): SE 1/4 NE 1/4 Sec 11 T17N R21E Town of Schleswig

Tax Parcel Number: 16-011-004-003.00

Property Address: 11421 S Lake Ln, Kiel, WI 53042

1. The owner is responsible for the operation and maintenance of the system, locking device, alarm, and water meter.

2. The owner agrees to have the holding tank(s) serviced by the pump and guarantees to permit the pump to have access and to enter upon the property for the purposes of servicing the holding tank(s). The owner agrees to maintain the access road or drive so that the pump can service the holding tank(s) with the pumping equipment. The owner further agrees to pay the pump for all charges incurred in servicing the holding tank(s).

3. The pump agrees to submit to the County a report for the servicing of the holding tank(s) on a semiannual basis. The pump further agrees to include the following in the semiannual report:

- The name and address of the person responsible for servicing the holding tank;
- The name of the owner of the holding tank;
- The location of the property on which the holding tank is installed;
- The sanitary permit number issued for the holding tank;
- The dates on which the holding tank was serviced;
- The volumes in gallons of the contents pumped from the holding tank for each servicing;
- The disposal sites to which the contents from the holding tank were delivered.

4. This agreement will remain in effect until the owner or pump terminates this contract. In the event of a change of this contract, the owner agrees to file a copy of any changes to this service contract or a copy of a new service contract with the local governmental unit and the County named above within ten (10) business days from the date of change to this service contract.

Owner(s) Name(s) (Print) Amanda Jurs	Owner's Signature(s) <i>[Signature]</i>	Contract Date/Today's Date 9-29-2022
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Pumper's Name (Print) Kyle Gether	Pumper's Signature <i>[Signature]</i>	Pumper's Registration Number 2494
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Drafted by the Manitowoc County Planning & Park Commission



