

IP-NO-2013-58-01501

RECEIVED
JUN 03 2013
DNR SUPERVISOR

Notice: Pursuant to chs. 30 and 31, Wis. Stats., and s. 283.33, Wis. Stats., this form is used to apply for coverage under the state construction site storm water runoff general permit, and to apply for a state or federal permit or certification for waterway and wetland projects or dam projects. This form and any required attachments constitute the permit application. Failure to complete and submit this application form may result in a fine and/or imprisonment or forfeiture under the provisions of applicable laws including s. 283.91, Wis. Stats. Personal information collected will be used for administrative purposes and may be provided to requesters to the extent required by Wisconsin's Public Records Laws (ss. 19.31-19.39, Wis. Stats.).

Use this form for (check all that apply):

- Work in public waters (DNR - ch. 30, Wis. Stats.)
- Storm water NOI - New land disturbing construction activity
- Work in waters of the U.S (Corps of Engineers)
- Storm water NOI - Renewal FIN # _____
- Permit for Wetland Fill (DNR or Corps of Engineers)
- Dam projects (DNR or Corps of Engineers)

Read all instructions provided before completing. If additional space is needed, attach additional pages.

Section 1: Applicant/Permittee Information

Applicant Name (Ind., Org. or Entity)		Authorized Representative		Title	
Sawyer County		Dale Olson		ZAC Administrator	
Mailing Address		City		State	ZIP Code
10610 Main Street, Suite 49		Hayward		WI	54843
Email Address		Phone Number (incl. area code)		FAX Number (incl. area code)	
conservation@sawyercountygov.org		(715) 634-8288		(715) 638-3277	

Section 2: Landowner Information (complete these fields when project site owner is different than applicant)

Name (Ind., Org. or Entity)		Contact Person		Title	
Mailing Address		City		State	ZIP Code
Email Address		Phone Number (incl. area code)		FAX Number (incl. area code)	

Section 3: Other Contact Information (check one)

- Consultant or Plan Preparer Contractor Agent Other If Other, specify: _____

Name (Ind., Org. or Entity)		Contact Person		Title	
Mailing Address		City		State	ZIP Code
Email Address		Phone Number (incl. area code)		FAX Number (incl. area code)	

Section 4: Project or Site Location

Project Name	County	<input type="checkbox"/> City	<input checked="" type="checkbox"/> Town	<input type="checkbox"/> Village
Carlson Road Dam	Sawyer	of Hayward		

Location Address/Description
Appx. 1/4 mile east of Frogg Rd. on Carlson Rd.

Section 5: Location Information

Create a map depicting the project location or the perimeter of the construction site (land disturbance) and relationship to nearby water resources using the Surface Water Data Viewer <http://dnr.wi.gov/topic/surfacewater/swdv/> or a 7.5-minute series topographic map. You can print the map and then draw the location on the map.

Provide the section, range, township information and if available, the Latitude and Longitude information.

PLSS (Public Land Survey System) Method

Quarter-Quarter sw	Quarter se	Section 36	Township 41 N	Range 8	<input type="checkbox"/> E <input checked="" type="checkbox"/> W	If this site is not wholly contained on the quarter-quarter section, more description:
-----------------------	---------------	---------------	------------------	------------	---	--

Water Resources Application for Project Permits

Form 3500-053 (R 9/12)

Page 2 of 3

Section 6: Waterways and Wetlands (see instructions about potential additional application requirements)

Name (description if unnamed) of closest waterbodies <u>Little Round Lake / Osprey Lake</u>	Type <input type="radio"/> Lake <input checked="" type="radio"/> Stream	Special Status <input type="radio"/> ORW/ERW <input type="radio"/> 303(d) listed
--	--	---

Yes No Wetlands:

Wetlands will be filled, excavated, or disturbed during construction or as part of this project.

The presence of wetlands has been evaluated using: (check all that apply)

- | | |
|--|---|
| <input type="checkbox"/> Wisconsin Wetlands Inventory | <input type="checkbox"/> Wetland Delineation (attached report) |
| <input type="checkbox"/> Wetland Locator Tool
http://dnr.wi.gov/topic/Wetlands/locating.html | <input checked="" type="checkbox"/> Soils (NRCS maps) <input type="checkbox"/> Other: |

Applicant/Project Name: <u>Carlson Road dam removal</u>	County <u>Sawyer</u>
---	----------------------

Latitude and Longitude Method (if available)

	Degrees	Minutes	Seconds	Method of Determining
Latitude				<input type="checkbox"/> GPS <input type="checkbox"/> DNR's Surface Water Data Viewer <input type="checkbox"/> Other:
Longitude				

Section 7: Project Information (attach additional sheets as necessary)

Duration:	Anticipated Project Start Date (mm/dd/yyyy) <u>07/30/2013</u>	Anticipated Project End Date (mm/dd/yyyy) <u>09/30/2013</u>
	Photos: Provide photographs of the "before" condition. Date of Photographs (mm/dd/yyyy)	

Narrative of the Project:

Provide a one to two paragraph description of the proposed project, including land and water alterations and intended use(s) of the project.

Removal of current wingwalls, sill plate, and decking. Replacement with concrete box culvert 12'Wx7'Hx20'L.

Section 8: Attachments and Permit Access (include required attachments for each proposed activity.)

The following attachments, such as the construction Erosion and Sediment Control (form 3500-052A) and the Post-Construction Storm Water Management (form 3500-052B) for a storm water construction permit application, constitute this permit application: (include all that apply)

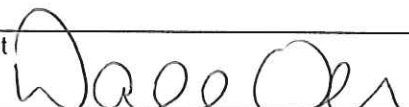
Attachment name(s):

I have obtained a copy of the construction site storm water runoff general permit from the department's internet site: <http://dnr.wi.gov/topic/Stormwater/construction/forms.html>

Section 9: Certification and Permission

Certification: I hereby certify that I am the owner or authorized representative of the owner of the property which is the subject of this Permit Application. I certify that the information contained in this form and attachments is true and accurate. I certify that the project will be in compliance with all permit conditions. I understand that failure to comply with any or all of the provisions of the permit may result in permit revocation and a fine and/or imprisonment or forfeiture under the provisions of applicable laws.

Permission: I hereby give the Department permission to enter and inspect the property at reasonable times, to evaluate this notice and application, and to determine compliance with any resulting permit coverage.

Name of Owner/Authorized Representative (please print) <u>Dale Olson</u>	Title <u>ZAC Administrator</u>	Phone Number <u>(715) 634-8288</u>
Signature of Applicant 		Date Signed <u>5/30/13</u>

**Water Resources Application for
Project Permits**

Form 3500-053 (R 9/12)

LEAVE BLANK - AGENCY USE ONLY				
Date Received	Fee Received \$	Construction Site ID#	Docket #	Corps #
Initial screening: Completeness	<input type="checkbox"/> Historic checked <input type="checkbox"/> Rare species (NHI) checked <input type="checkbox"/> Wetlands checked			

