

Chemical Aquatic Plant Control Application and Permit Wisconsin Pollutant Discharge Elimination System (WPDES) Pesticide Pollutant Permit Application

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Form 3200-004 (R 06/19)

Notice: Use of this form is required by the Department for any application filed pursuant to ss. 281.17(2) and 283.37, Wis. Stats., and Chapters NR 107, 200 and 205, Wis. Adm. Code. This permit application is required to request coverage for pollutant discharge into waters of the state. Personally identifiable information on this form may be provided to requesters to the extent required by Wisconsin's Open Records Law [ss. 19.31-19.39, Wis. Stats.].

DNR Use Only	
ID Number	Permit Expiration Date
Waterbody #	Fee Received

Section I – Applicant Information – Name of Permit Applicant. Also indicate names and addresses of all individuals, associations, communities or town sanitary districts sponsoring treatment. Attach additional sheets if necessary.

<p>Home Address</p> <p>Name _____</p> <p>Street Address _____</p> <p>City _____ State _____ ZIP Code _____</p> <p>Phone Number (include area code) Primary: (262) 367-2239 Secondary: _____</p>	<p>Waterbody Address</p> <p>Name _____</p> <p>Moose Lake Advancement Association c/o Mark Olson</p> <p>Street Address _____</p> <p>W330 N6163 Hasslinger Dr.</p> <p>City _____ State _____ ZIP Code _____</p> <p>Nashotah WI 53058</p> <p>Email Address mark.olson@caleffi.com</p>
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Section II – Aquatic Plant Control Location

Waterbody to be Treated (waterbody where treatment area is located)				Lake Surface Area	Estimated Surface Area that is 10 Feet or Less in Depth
Moose				89 acres	20 acres
County	Section	Township	Range	Name of Applicator or Firm	
Waukesha	19	08 N	18 <input checked="" type="radio"/> E <input type="radio"/> W	Marine Biochemists	
Latitude	Longitude		Street or Route		
43.1289900	-88.4056100		N173 W21440 Northwest Passage		
<ul style="list-style-type: none"> • Is there more than one property owner? <input checked="" type="radio"/> Yes <input type="radio"/> No • Will there be uncontrolled surface water discharge? <input checked="" type="radio"/> Yes <input type="radio"/> No • Does the waterbody have public access? <input checked="" type="radio"/> Yes <input type="radio"/> No 				City	ZIP Code
If all are no: this is a private pond, please use form 3200-155				Jackson	WI 53037
Adjacent Riparian Property Owner Names (attach sheets if necessary)				County	Phone Number (include area code)
1. See attached list				Washington	(262) 674-1783
2. _____				Email Address	
3. _____				brian.suffern@sigurawater.com	
4. _____				Applicator Certification Number for Category 5 Aquatic Pesticide Application	
5. _____				93-001517	
6. _____				Business Location License Number (if applicable)	
Name of Lake Property Owners' Association Representative or Lake District Representative (if none, please indicate)				93-026227-019614	
Mr. Mark Olson				Restricted Use Pesticide License Number (if applicable)	

Area(s) Proposed for Control:		Estimated Acreage	Average Depth	Calculated Volume
Treatment Length	Treatment Width			
1. ft X _____ ft ÷	43,560 ft ² =	1 ac	7 ft	7 ac-ft
2. ft X _____ ft ÷	43,560 ft ² =	4.4 ac	7 ft	30.8 ac-ft
3. ft X _____ ft ÷	43,560 ft ² =	3 ac	7 ft	21 ac-ft
4. ft X _____ ft ÷	43,560 ft ² =	1.7 ac	7 ft	11.9 ac-ft
5. ft X _____ ft ÷	43,560 ft ² =	0.8 ac	5 ft	4 ac-ft
6. ft X _____ ft ÷	43,560 ft ² =	1.9 ac	7 ft	13.3 ac-ft
7. ft X _____ ft ÷	43,560 ft ² =	0.4 ac	2 ft	0.8 ac-ft
8. ft X _____ ft ÷	43,560 ft ² =	0.6 ac	7 ft	4.2 ac-ft
9. ft X _____ ft ÷	43,560 ft ² =	_____ ac	_____ ft	_____ ac-ft
Estimated Acreage Grand Total		13.8 ac	Calculated Volume Grand Total	
			92.1 ac-ft	

If the estimated acreage is greater than 10 acres, or is greater than 10 percent of the estimated area 10 feet or less in depth in Section II, complete and attach Form 3200-004A, Large-Scale Treatment Worksheet. Private pond treatments are exempted from this requirement.

Is this area within or adjacent to a sensitive area designated by the Department of Natural Resources? Yes No

<p>DNR Use: NHI Review? <input type="radio"/> Yes <input type="radio"/> No Describe:</p>	
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Section III – Fees

1. [s. NR 107.11\(1\)](#), Wis. Adm. Code, lists the conditions under which the permit fee is limited to the \$20 minimum charge.
2. [s. NR 107.11\(4\)](#), Wis. Adm. Code, lists the uses that are exempt from permit requirements.
3. [s. NR 107.04\(2\)](#), Wis. Adm. Code, provides for a refund of acreage fees if the permit is denied or if no treatment occurs.
4. Fee calculations:

If proposed treatment is over 0.25 acre, calculate acreage fee:
(round up to nearest whole acre, to maximum of 50 acres.)

_____ 14 _____ acres X \$25 per acre = \$ _____ 350 _____

If proposed treatment is ≤ 0.25 acre, acreage fee is \$0.

Enter Acreage Fee (from above) \$ _____ 350.00

Basic Permit Fee (non-refundable) \$ _____ 20.00

Total Fee Enclosed \$ _____ 370.00

Site Map: Attach a sketch or a printed map of lake indicating area and dimensions of each individual area where plant control is desired and flow of surface water outside treatment area. Also show location of property owners riparian to and adjacent to the treatment area. Attach a separate list of owners and corresponding treatment dimensions coded to the lake map, if necessary.

Section IV – Reasons for Aquatic Plant Control

Is this permit being requested in accordance with an approved Aquatic Plant Management Plan? <input type="radio"/> Yes <input checked="" type="radio"/> No	Treatment Type: <input checked="" type="radio"/> Lake <input type="radio"/> Pond <input type="radio"/> Wetland <input type="radio"/> Marina <input type="radio"/> Other
Goal of Aquatic Plant Control: 1. <input type="checkbox"/> Maintain navigational channel 2. <input checked="" type="checkbox"/> Maintain boat landing and carry in access 3. <input type="checkbox"/> Improve fish habitat 4. <input checked="" type="checkbox"/> Maintain swimming area 5. <input checked="" type="checkbox"/> Control of invasive exotics 6. <input type="checkbox"/> Other: _____	Nuisance Caused By: <input type="checkbox"/> Algae <input type="checkbox"/> Emergent water plants (majority of leaves and stems growing above water surface, e.g. cattails, bulrushes) <input type="checkbox"/> Floating water plants (majority of leaves floating on water surface, e.g., waterlilies, duckweed) <input checked="" type="checkbox"/> Submerged water plants (leaves and stems below water surface, flowering parts may be exposed, e.g., milfoil, coontail) <input type="checkbox"/> Other: _____

List Target Plants <input type="checkbox"/> Algae <input type="checkbox"/> Common/Glossy Buckthorn <input type="checkbox"/> Coontail <input type="checkbox"/> Curly Leaf Pondweed <input type="checkbox"/> Duckweeds <input type="checkbox"/> Pondweeds	<input type="checkbox"/> Elodea <input checked="" type="checkbox"/> Eurasian Watermilfoil <input type="checkbox"/> Flowering Rush <input type="checkbox"/> Hybrid Cattail <input type="checkbox"/> Hybrid Watermilfoil Other plants: _____	<input type="checkbox"/> Japanese Knotweed <input type="checkbox"/> Naiad <input type="checkbox"/> Narrow-Leaf Cattail <input type="checkbox"/> Phragmites <input type="checkbox"/> Purple Loosestrife	<input type="checkbox"/> Reed Canary Grass <input type="checkbox"/> Reed Manna Grass <input type="checkbox"/> Starry Stonewort <input type="checkbox"/> Yellow Floating Heart <input type="checkbox"/> Yellow Iris
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Note: Different plants require different chemicals for effective treatment. Do not purchase chemical before identifying plants.

Section V – Chemical Control

Full Trade Name of Proposed Chemical(s):

<input type="checkbox"/> Algimycin PWF	<input type="checkbox"/> Clearcast	<input type="checkbox"/> Garlon 3A	<input checked="" type="checkbox"/> Navigate	<input type="checkbox"/> Renovate LZR	<input type="checkbox"/> Sonar Genesis
<input type="checkbox"/> Aqua Star	<input type="checkbox"/> Clearigate	<input type="checkbox"/> Green Clean	<input type="checkbox"/> Navitrol	<input type="checkbox"/> Renovate Max G	<input type="checkbox"/> Sonar H4C
<input type="checkbox"/> Aquaneat	<input type="checkbox"/> Clipper	<input type="checkbox"/> Habitat	<input type="checkbox"/> Navitrol DPF	<input type="checkbox"/> Renovate OTF	<input type="checkbox"/> Sonar PR
<input type="checkbox"/> AquaPro	<input type="checkbox"/> Clipper SC	<input type="checkbox"/> Harpoon	<input type="checkbox"/> Nutrisorb	<input type="checkbox"/> Reward	<input type="checkbox"/> Sonar Q
<input type="checkbox"/> Aquashade	<input type="checkbox"/> Current	<input type="checkbox"/> Harvester	<input type="checkbox"/> Orb-3	<input type="checkbox"/> Rodeo	<input type="checkbox"/> Sonar RTU
<input type="checkbox"/> Aquashadow	<input type="checkbox"/> Cutrine-Plus	<input type="checkbox"/> Havoc Amine	<input type="checkbox"/> Phycomyacin SCP	<input type="checkbox"/> Roundup Custom	<input type="checkbox"/> Sonar SRP
<input type="checkbox"/> Aquastrike	<input type="checkbox"/> Cutrine-Plus Granular	<input type="checkbox"/> Hydrothol 191	<input type="checkbox"/> Polaris	<input type="checkbox"/> SCI-62	<input type="checkbox"/> SonarOne
<input type="checkbox"/> Aquathol K	<input type="checkbox"/> Cutrine-Ultra	<input type="checkbox"/> Hydrothol Granular	<input type="checkbox"/> Polaris AC	<input checked="" type="checkbox"/> Sculpin G	<input type="checkbox"/> Stingray
<input type="checkbox"/> Aquathol Super K	<input type="checkbox"/> DMA 4 IVM	<input type="checkbox"/> Komeen	<input type="checkbox"/> Pond-Klear	<input type="checkbox"/> SeClear	<input type="checkbox"/> Symmetry NXG
<input type="checkbox"/> Avast! SC	<input type="checkbox"/> EarthTec	<input type="checkbox"/> Komeen Crystal	<input type="checkbox"/> ProcellaCOR EC	<input type="checkbox"/> SeClear G	<input type="checkbox"/> Touchdown Pro
<input type="checkbox"/> Captain	<input type="checkbox"/> Element 3A	<input type="checkbox"/> K-Tea	<input type="checkbox"/> Refuge	<input type="checkbox"/> Shore-Klear	<input type="checkbox"/> Tribune
<input type="checkbox"/> Captain XTR	<input type="checkbox"/> Flumioxazin 51% WDG	<input type="checkbox"/> Milestone	<input type="checkbox"/> Renovate 3	<input type="checkbox"/> Shredder Amine	<input checked="" type="checkbox"/> Weedar 64
<input type="checkbox"/> Chinook	<input type="checkbox"/> Formula F-30	<input type="checkbox"/> Nautique	<input type="checkbox"/> Renovate LZR	<input type="checkbox"/> Sonar AS	<input type="checkbox"/> Weedestroy AM-40

Other Proposed Chemical(s): _____

Method of Application: Gasoline Powered Blower (granular), Gasoline Powered Injection System (liquids)

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Section V – Chemical Control (continued)

Alternatives to Chemical Control:	Feasible?	If No, Why Not?
1. Mechanical harvesting	<input type="radio"/> Yes <input checked="" type="radio"/> No	<u>May exacerbate problem</u>
2. Manual removal	<input type="radio"/> Yes <input checked="" type="radio"/> No	<u>Too labor intensive for deep water areas</u>
3. Sediment screens/covers	<input type="radio"/> Yes <input checked="" type="radio"/> No	<u>Too labor intensive for deep water areas</u>
4. Dredging	<input type="radio"/> Yes <input checked="" type="radio"/> No	<u>Cost prohibitive</u>
5. Lake drawdown	<input type="radio"/> Yes <input checked="" type="radio"/> No	<u>No control structure</u>
6. Nutrient controls in watershed	<input checked="" type="radio"/> Yes <input type="radio"/> No	
7. Other: _____	<input type="radio"/> Yes <input type="radio"/> No	

Note: If proposed treatment involves multiple properties, consider feasibility of EACH alternative for EACH property owner.

Note: Chemical fact sheets for aquatic pesticides used in Wisconsin are available from the Department of Natural Resources at the following link: dnr.wi.gov/Lakes/plants/factsheets/.

Will surface water outflow be controlled to prevent chemical loss? Yes No

Have proposed chemicals been permitted in a prior year on the proposed site? All Some None

What were the results of the treatment?
Very effective.

Is treatment area greater than 5% of surface area? Yes No

If yes, calculate whole lake concentration (in ppm). Refer to DNR Lake pages dnr.wi.gov/Lakes to answer the following:

Does the lake stratify? Yes No

If yes, calculate whole lake concentration using volume above thermocline.
If no, calculate whole lake concentration using total lake volume.

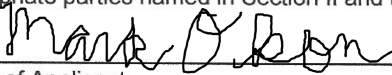
Whole Lake Concentration: 0.1 ppm Proposed Chemical(s): Weedar 64

Section VI – Applicant Responsibilities and Certification

1. The applicant has prepared a detailed map which shows the length, width and average depth of each area proposed for the control of rooted vegetation and the surface area in acres or square feet for each proposed algae treatment.
2. The applicant understands that the Department of Natural Resources may require supervision of any aquatic plant management project involving chemicals. Under s. NR 107.07, Wis. Adm. Code, supervision may include inspection of the proposed treatment area, chemicals and application equipment before, during or after treatment. The applicant is required to notify the regional office 4 working days in advance of each anticipated treatment with the date, time, location and size of treatment unless the Department waives this requirement. Do you request the Department to waive the advance notification requirement? Yes No
3. The applicant agrees to comply with all terms or conditions of this permit, if issued, as well as all provisions of Chapter NR 107, Wis. Adm. Code. The required application fee is attached.
4. The applicant has provided a copy of the current application to any affected property owners' association, inland lake district and, in the case of chemical applications for rooted aquatic plants, to all owners of property riparian or adjacent to the treatment area. The applicant has also provided a copy of the current chemical fact sheet for the chemicals proposed for use to any affected property owner's association or inland lake district.
5. Conditions related to invasive species movement. The applicant and operator agree to the following methods for controlling, transporting and disposing of aquatic plants and animals, and moving water:
 - Aquatic plants and animals shall be removed and water drained from all equipment as required by s. 30.07, Wis. Stats., and ss. NR 19.055 and 40.07, Wis. Adm. Code.
 - Operator shall comply with the most recent Department-approved 'Boat, Gear, and Equipment Decontamination and Disinfection Protocol', Manual Code # 9183.1, available at <http://dnr.wi.gov/topic/invasives/disinfection.html>

Check if you are signing as Agent for Applicant.

I hereby certify that the above information is true and correct and that copies of this application have been provided to the appropriate parties named in Section II and that the conditions of the permit and pesticide use will be adhered to.



Signature of Applicant

April 10, 2020

Date Signed

All portions of this permit, map and accompanying cover letter must be in possession of the chemical applicator at time of treatment. During treatment all provisions of Chapter NR 107, specifically ss. NR 107.07 and NR 107.08, Wis. Adm. Code, must be complied with, as well as the specific conditions contained in the permit cover letter.

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Section VII – WPDES Permit Request

Is WPDES coverage being requested? Refer to <http://dnr.wi.gov/topic/wastewater/aquaticpesticides.html> for more information.

- No:
 Already have WPDES coverage.
 Yes – complete section VII with signature
 WPDES coverage not needed

- Select which permit you are requesting:
- WI-0064556-1 Aquatic Plants, Algae & Bacteria
 WI-0064564-1 Aquatic Animals
 WI-0064581-1 Mosquitoes & other Flying Insects

Indicate WPDES permittee responsible for the pollutant discharge:
 Applicator
 Sponsor

Do you expect the pest control activity will result in a detectable pollutant discharge to waters of the state beyond the treatment area boundary or a pollutant residual in waters of the state after the treatment project is completed?
 Yes
 No

If yes, identify the pollutant(s): _____

Are you planning to incorporate integrated pest management principles, as specified in the WPDES permit, into your pest control activity to minimize any pollutant residual or pollutant discharge beyond the treatment area?
 Yes
 No


Type of WPDES coverage being requested:
 One Treatment Site
 Statewide Coverage

For informational purposes, select areas of WI for most of your aquatic treatments:
 NW
 NE
 SW
 SE

Is WPDES coverage being requested for more than 1 year?

- Yes
 No
 If yes, the permittee will remain in "active" WPDES status until a Notice of Termination is submitted.

I hereby certify that I am the authorized representative (as specified in Ch. NR 205.07(1)(g), Wis. Adm. Code) of the pest treatment activity which is the subject of this permit application. I certify that the information contained in this form and attachments is, to the best of my knowledge, true, accurate and complete.


Mark Olson
5/1/2020

Signature of Authorized Representative
Printed Name
Date Signed

Section VIII – Permit to Carry Out Chemical Treatment (Leave Blank – DNR Use Only)

The foregoing application is approved. Permission is hereby granted to the applicant to chemically treat the waters described in the application during the season of 20____.

Application fee received? <input type="radio"/> Yes <input type="radio"/> No	State of Wisconsin Department of Natural Resources For the Secretary
Advance notification of treatment required? <input type="radio"/> Yes <input type="radio"/> No	By _____ Regional Director or Designee _____ _____ Date Signed Date Mailed

Please Note:

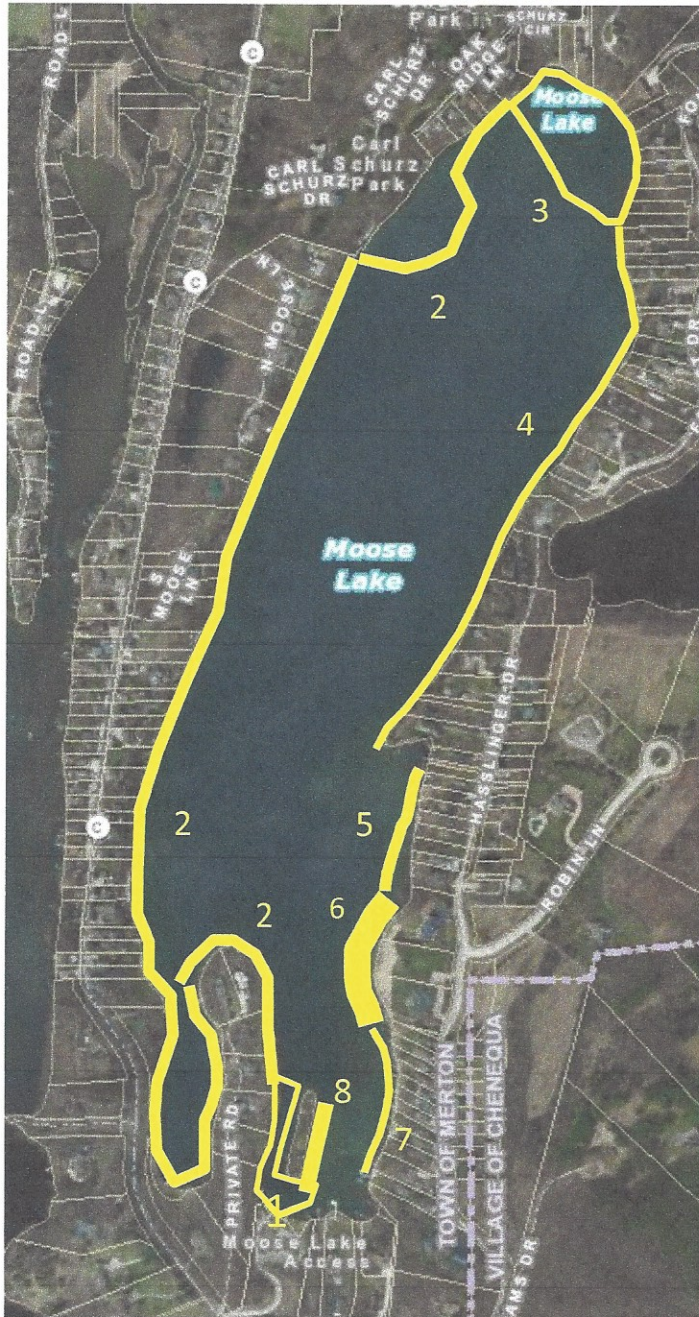
If you believe that you have a right to challenge this decision, you should know that Wisconsin statutes and administrative rules establish time periods within which requests to review Department decisions must be filed.

For judicial review of a decision pursuant to ss. 227.52 and 227.53, Wis. Stats., you have 30 days after the decision is mailed or otherwise served by the Department, to file your petition with the appropriate circuit court and serve the petition on the Department. Such a petition for judicial review shall name the Department of Natural Resources as the respondent.

To request a contested case hearing pursuant to s. 227.42, Wis. Stats., you have 30 days after the decision is mailed, or otherwise served by the Department, to serve a petition for hearing on the Secretary of the Department of Natural Resources. The filing of a request for a contested case hearing is not a prerequisite for judicial review and does not extend the 30-day period for filing a petition for judicial review.

Moose Lake—Waukesha County

Proposed 2020 Eurasian Watermilfoil Treatment Map



Area	Length (ft.)	Width (ft.)	Acres	Depth (ft.)
1	550	80	1.0	7
2	6400	30	4.4	7
3	525	250	3.0	7
4	2500	30	1.7	7
5	450	75	0.8	5
6	550	150	1.9	7
7	600	30	0.4	2
8	300	75	0.6	7

Total 13.8

Calculations for lake volume above thermocline

Lake Size: 89 acres (from Waukesha Co. GIS site).

Note: WI DNR figure of 75 acres from 1955 is incorrect.

Area of Lake > 20 ft. in depth = 50.2 acres

Volume of lake above thermocline (20 ft. est.)

50.2 acres with depth of 20 ft. = 1004 acre-ft.

Remaining 38.8 acres (0-10')

has avg. depth of 7 ft. = 270.9 acre-ft.

Total est. lake volume is approx. 1275 acre-ft.

Assuming all 13.8 acres are treated (this will not be the case) with Navigate at 150# per acre, total max. qty. applied will be 2055#. At 19% Active Ingredient, a maximum of 390.5 lbs. of active will be applied. This results in a maximum lake-wide concentration (theoretical) of 113 ppb (parts per billion).

Marine Biochemists services at Lonza

N173W21440 Northwest Passage

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www.marienbiochemists.com