



RECEIVED

AUG 1 2023

VILAS CO ZONING & PLANNING

Industry Services Division
1400 E Washington Ave
P.O. Box 7162
Madison, WI 53707-7162

County
VILAS

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

655401

Sanitary Permit Application

State Transaction Number
082301559-C

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.

Project Address (if different than mailing address)
4267 DENTON RD

I. Application Information - Please Print All Information

Property Owner's Name
RON DAVISON

Parcel #
8-201-03

Property Owner's Mailing Address
103 BOEING TRL

Property Location

City, State
POPLAR GROVE, IL

Zip Code
61065

Phone Number

Govt. Lot 1
1/4, 1/4, Section 12
T 41 N ; R 9(E) or W (circle one)

II. Type of Building (check all that apply)

[X] 1 or 2 Family Dwelling - Number of Bedrooms 4

Lot #
PCL 2

[ ] Public/Commercial - Describe Use

Block #

[ ] State Owned - Describe Use

CSM Number

Subdivision Name

[ ] City of
[ ] Village of
[X] Town of CONOVER

III. Type of Permit: (Check only one box on line A. Complete line B if applicable)

A. [ ] New System [X] 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
101718-11/17/87

IV. Type of POWTS System/Component/Device: (Check all that apply)

[ ] Non-Pressurized In-Ground [X] Pressurized In-Ground [ ] At-Grade [ ] Mound >= 24 in. of suitable soil [ ] Mound < 24 in. of suitable soil
[ ] Holding Tank [ ] Other Dispersal Component (explain) [X] Pretreatment Device (explain) DELTA ECOPOD E60

V. Dispersal/Treatment Area Information:

Design Flow (gpd) 600 Design Soil Application Rate(gpdsf) 1.6 Dispersal Area Required (sf) 375 Dispersal Area Proposed (sf) 390 System Elevation 90.9/91.9

VI. Tank Info

Table with columns: Capacity in Gallons (New Tanks, Existing Tanks), Total Gallons, # of Units, Manufacturer, Prefab Concrete, Site Constructed, Steel, Fiber Glass, Plastic. Rows include Septic or Holding Tank and Dosing Chamber.

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

Plumber's Name (Print) GREG SIMAC Plumber's Signature [Signature] MP/MPRS Number 862511 Business Phone Number 715-617-9800

Plumber's Address (Street, City, State, Zip Code)
1849 MCKINLEY BLVD, EAGLE RIVER, WI 54521

VIII. County/Department Use Only

[X] Approved [ ] Disapproved [ ] Owner Given Reason for Denial Permit Fee \$ 550.00 Date Issued 9/1/2023 Issuing Agent Signature [Signature] #11407391

IX. Conditions of Approval/Reasons for Disapproval

1.) Existing system to be abandoned per SPS 383.33.
2.) All manufacturer requirements as attached to product approval must be followed.

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

Simac # 1969



August 1, 2023

**CONDITIONAL APPROVAL**

**PLAN APPROVAL EXPIRES: 2025-8-1**  
**Plan Review: PWTS-082301559-C**

Gregoy Simac  
1849 McKinley Blvd  
Eagle River, WI

**SITE:**

**Davidson**  
4267 Denton Rd  
Vilas County  
Town of Conover  
S12 T41 R9E

**FOR:**

Description: 4 Bedroom-600 GPD GPD – 71” to limiting factor – Effluent Filter - Maintenance required –	In-Ground Soil Absorption Component Manual 5/22-5/27 Pressure Distribution Component Manual – Ver. 2.1 (May 2022-2027)
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*Conditionally*  
**APPROVED**  
DEPT. OF SAFETY AND PROFESSIONAL  
SERVICES  
DIVISION OF INDUSTRY SERVICES

*Joshua Rowley*

SEE CORRESPONDENCE

The submittal described above has been reviewed for conformance with applicable Wisconsin Administrative Codes and Wisconsin Statutes. The submittal has been **CONDITIONALLY APPROVED**. This system is to be constructed and located in accordance with the enclosed approved plans and with any component manual(s) referenced above. The owner, as defined in chapter 101.01(10), Wisconsin Statutes, is responsible for compliance with all code requirements.

No person may engage in or work at plumbing in the state unless licensed to do so by the Department per s.145.06, stats.

The following conditions shall be met during construction or installation and prior to occupancy or use:

**Reminders**

- **If using the existing septic tank, it must be inspected for watertightness and structural soundness, size and baffles, and must be brought into conformance with the requirements of ch. SPS 383, Wis. Adm. Code.**
- A sanitary permit must be obtained from the county where this project is located in accordance with the requirements of **Sec. 145.19, Wis. Stats.**
- Inspection of the private sewage system installation is required. Arrangements for inspection shall be made with the designated county official in accordance with the provisions of **Sec. 145.20(2)(d), Wis. Stats.**

- A state approved effluent filter is required. Maintenance information must be given to the owner of the tank explaining that periodic cleaning of the filter is required.
- A copy of the approved plans, specifications and this letter shall be on-site during construction and open to inspection by authorized representatives of the Department, which may include local inspectors.

#### Owner Responsibilities

- The current owner, and each subsequent owner, shall receive a copy of this letter. Owners shall also receive a copy of the appropriate operation and maintenance manual(s) and be responsible for ensuring that POWTS is operated and maintained in accordance with this chapter and the approved management plan under s. **SPS 383.54(1)**.
- In the event this soil absorption system or any of its component parts malfunctions so as to create a health hazard, the property owner must follow the contingency plan as described in the approved plans.
- The owner is responsible for submitting a maintenance verification report acceptable to the county for maintenance tracking purposes. Reports shall be submitted at intervals appropriate for the component(s) utilized in the POWTS.

In granting this approval the Division of Industry Services reserves the right 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.

Inquiries concerning this correspondence may be made to me at the telephone number listed below, or at the address on this letterhead.

The above left addressee shall provide a copy of this letter and the POWTS management plan to the owner and any others who are responsible for the installation, operation or maintenance of the POWTS.

Sincerely,

*Joshua Rowley*

Joshua Rowley  
POWTS Plan Reviewer, Division of Industry Services  
(715) 634-5124 [joshua.rowley@wisconsin.gov](mailto:joshua.rowley@wisconsin.gov)

# **SIMAC'S** **Plumbing** LLC

1849 McKinley Blvd. • Eagle River, WI 54521  
(715) 617-9800 • simacsplumbing@gmail.com  
MPRS, CST 862511

Ron Davison

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8-201-03

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## **DESIGN, CALCULATIONS, AND ASSUMPTIONS FOR STATE APPROVAL**

This permit application is for a 4-bedroom in-ground pressure distribution with pretreatment to replace the existing 2-bedroom conventional POWTS. The new system will utilize a Delta Ecopod E60 for pretreatment followed by a new 750-gallon pump tank. The new drain field will partially sit in the footprint of the existing drain field. The existing drain field will be dug out and disposed of properly to a depth of 12 inches below system bottom. A foot of ASTM C33 sand will be brought in to bring the drain field area up to original grade. A 6' x 65' EZFlow pressurized drain field will be installed at an elevation of 91.9, not including the 12" of ASTM C33 sand (90.9).

4-bedroom x 150 gpd/bedroom = 600 GPD DWF.

POWTS will utilize effluent loading rate of 1.6 due to pretreatment.

600gpd / 1.6 = 375 sq ft required

6' x 65' EZFlow bed = 390 sq ft

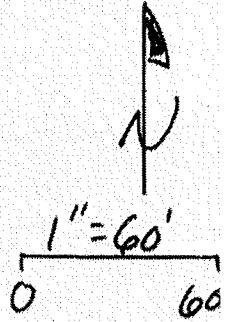
# SIMAC'S Plumbing

1849 McKinley Blvd. • Eagle River, WI 54521  
 (715) 617-9800 • simacsplumbing@gmail.com  
 MPRS, CST 862511

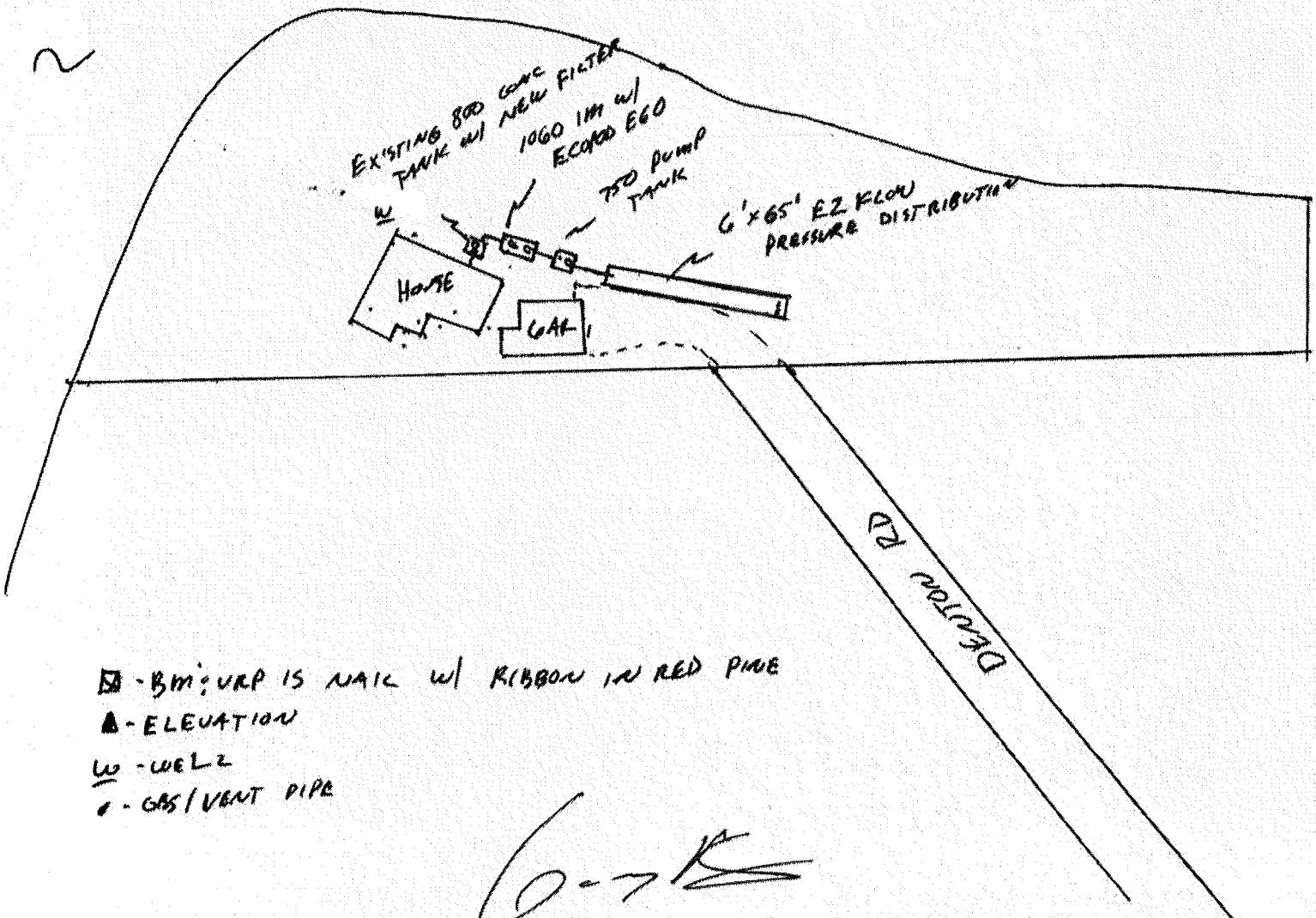
RON DAVIDSON

8-201-03

PAGE 9 OF 9



STORMY  
LAKE  
# 81



- ◻ - BM: VAP IS NAIL w/ RIBBON IN RED PIPE
- ▲ - ELEVATION
- W - WELL
- - GAS / VENT PIPE

*[Signature]*  
7-31-23

# EZFlow

# and Pressure Distribution Component Design

## Design Worksheet

### Site Information

(r or c)

<b>r</b>	Residential or Commercial Design
<b>400.00</b>	Estimated Wastewater Flow (gpd)
<b>1.50</b>	Peaking Factor (e.g. 1.5 = 150%)
<b>600.00</b>	Design Flow (gpd)
<b>0.00</b>	Site Slope (%)
<b>91.90</b>	Installation Contour Line Elevation (ft)
<b>36.00</b>	Depth to Limiting Factor (in)
<b>1.60</b>	In-situ Soil Application Rate (gpd/ft <sup>2</sup> )

Note: Sand fill (D) calculations assume a Table 83-44-3 in-situ soil treatment for fecal coliform of <= 36 inches.

**90.00** Contour Length Available (ft)

### Distribution Cell Information

<b>6.00</b>	Cell Width (ft) 3, 4, 6, 7, 9, or 10 Only
<b>1.60</b>	Dispersal Cell Design Loading Rate (gpd/ft <sup>2</sup> )
<b>2</b>	Influent Wastewater Quality (1 or 2)

**65.00** = Dispersal Cell Length (ft)

Are the laterals the highest point in the distribution network? **y**  
Enter Y or N

If N above, enter the elevation (ft) of the highest point.

### Pressure Distribution Information

(c or e)

<b>e</b>	Center or End Manifold
<b>3.00</b>	Lateral Spacing (ft)
<b>2</b>	Number of Laterals
<b>0.188</b>	Orifice Diameter (in) (e.g. 0.25)
<b>3.50</b>	Estimated Orifice Spacing (ft) =
<b>2.00</b>	Forcemain Diameter (in)
<b>15.00</b>	Forcemain Length (ft)
<b>90.00</b>	Inside Pump Tank Elevation (ft)

**10.26** ft<sup>2</sup>/orifice

Does the forcemain drain back? **y**  
Enter Y or N

<b>3.25</b>	System Head (ft) x 1.3
<b>2.07</b>	Vertical Lift (ft)
<b>0.21</b>	Friction Loss (ft)
<b>5.52</b>	Total Dynamic Head (ft)

<b>2.45</b>	Forcemain Drainback (gal)
<b>58.30</b>	5x Void Volume (gal)
<b>60.75</b>	Minimum Dose Volume (gal)
<b>24.90</b>	System Demand (gpm)

Lateral Diameter Selection		
in. dia.	options	choice
0.75		
1.00		
1.25		
1.50	<b>x</b>	<b>x</b>
2.00	<b>x</b>	
3.00	<b>x</b>	

Manifold Diameter Selection		
in. dia.	options	choice
1.25	<b>x</b>	
1.50	<b>x</b>	<b>x</b>
2.00		
3.00		

### Treatment Tank Information

<b>1800.00</b>	Septic Tank Capacity (gal)
<b>CONCRETE PRODUC</b>	Manufacturer

### Gallons/Inch Calculator (optional)

<b>750.00</b>	Total Tank Capacity (gal)
<b>36.50</b>	Total Working Liquid Depth (in)
<b>20.55</b>	gal/in (enter result in cell B49)

### Dose Tank Information

<b>750.00</b>	Dose Tank Capacity (gal)
<b>20.55</b>	Dose Tank Volume (gal/in)
<b>CONCRETE PRODUC</b>	Manufacturer

### Effluent Filter Information

<b>ORENCO</b>	Filter Manufacturer
<b>FT 0882-14</b>	Filter Model Number

# EZFlow Distribution Cell Media Layout

6.00 Cell Width (ft)

1.50 Sidewall to Lateral (ft)

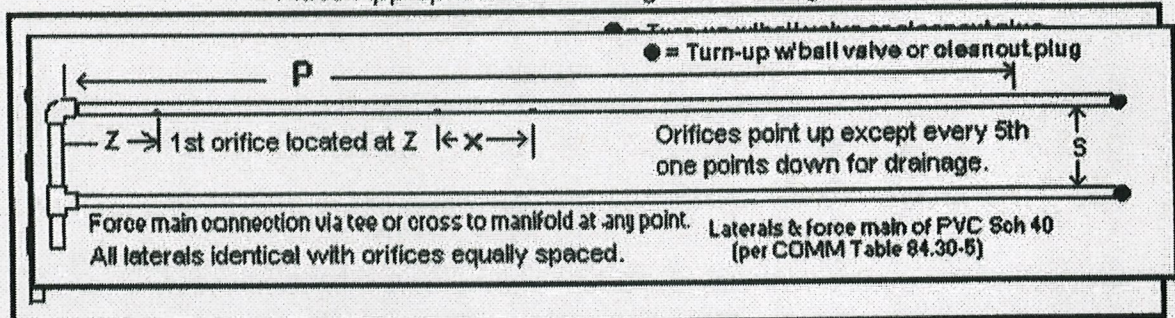
## Distribution Cell Cross-section Arrangements

Drag appropriate drawing to space below.



## End Connection Lateral Layout Diagram

Place Appropriate Lateral Diagram From Right Below



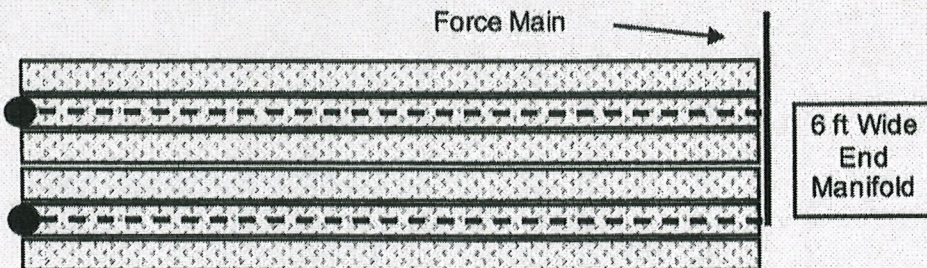
Number of Laterals	2	Orifice Diameter	0.188 in
Lateral Diameter	1.50 in	Orifice Spacing (X)	3.53 ft
Lateral Length (P)	64.27 ft	Orifices per Lateral	19
Lateral End (Z)	0.73 ft	Orifice Density	10.26 ft <sup>2</sup> /orifice
Lateral Spacing (S)	3.00 ft	Manifold Length	3.00 ft
Lateral Flow Rate	12.45 gpm	Manifold Diameter	1.50 in
System Flow Rate	24.90 gpm	Forcemain Velocity	2.54 ft/sec

## Distribution Cell Plan View Layout - Typical

6.00 Cell Width - A (ft)

65.00 Cell Length - B (ft)

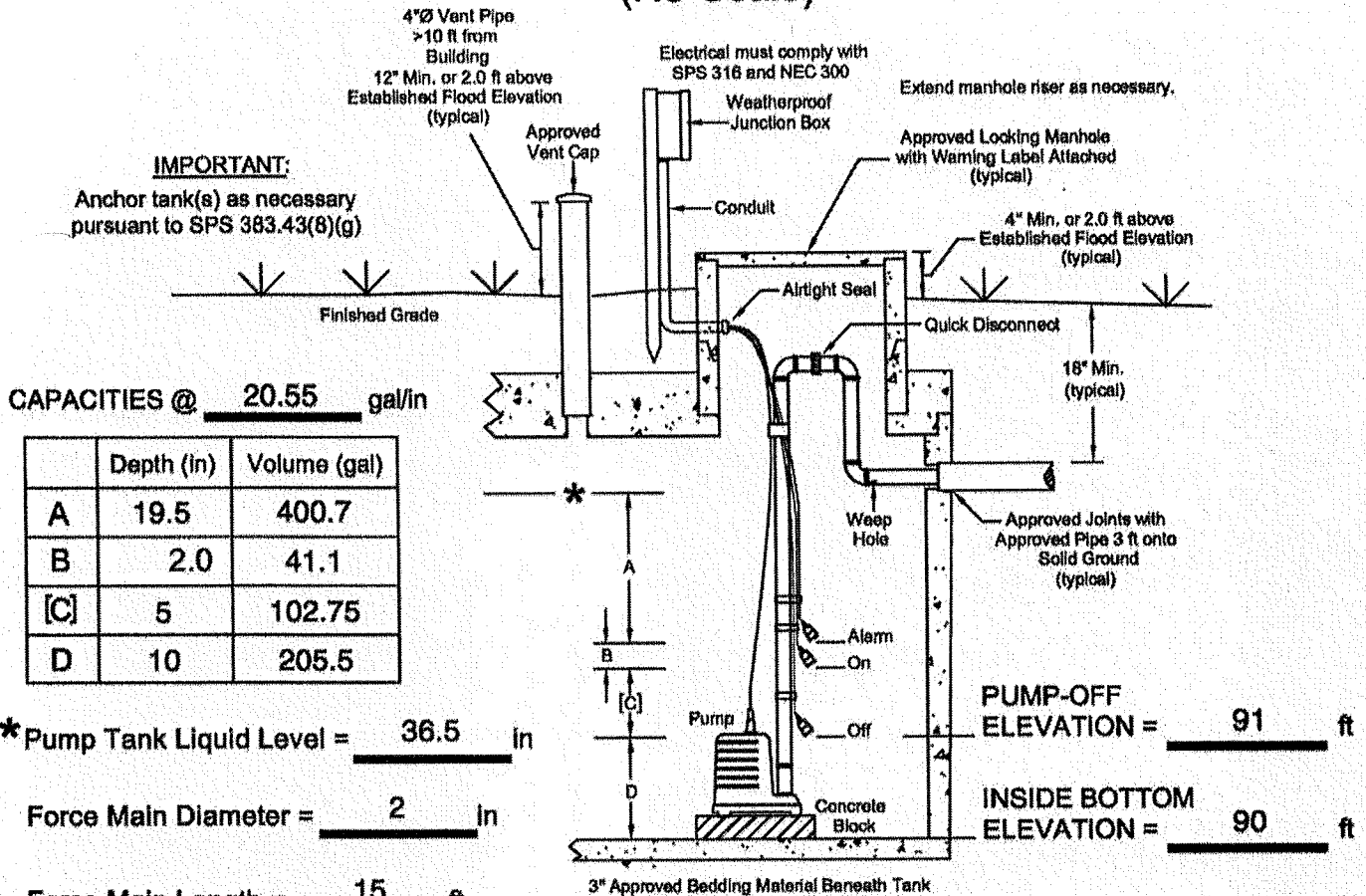
Center Connection Lateral Layout Diagram  
Drag appropriate drawing from left to space below.



# SEPTIC / PUMP TANK SPECIFICATIONS (No Scale)

**IMPORTANT:**

Anchor tank(s) as necessary pursuant to SPS 383.43(8)(g)



CAPACITIES @ 20.55 gal/in

	Depth (in)	Volume (gal)
A	19.5	400.7
B	2.0	41.1
[C]	5	102.75
D	10	205.5

\* Pump Tank Liquid Level = 36.5 in

Force Main Diameter = 2 in

Force Main Length = 15 ft

Force Main Void Volume = 2.4 gal

[C] Total Dose Volume (TDV) = 122.4 gal/dose

(5X total lateral void volume ≤ TDV ≤ 0.2X design flow)  
+ (force main drainback volume)

MIN. PUMP DISCHARGE RATE = 25 gpm

Vertical Head = 1.9 ft

+ Min. Supply Head =          ft

+ FM Friction Loss = 1 ft

+ Fitting Loss\* =          ft

\*(min. supply head x 0.3)

= TOTAL DYNAMIC HEAD = 2.9 ft

PUMP-OFF ELEVATION = 91 ft

INSIDE BOTTOM ELEVATION = 90 ft

**PUMP TANK:**

Volume = 750 gal

Manufacturer: CONCRETE PRODUCTS, INC

Pump Manufacturer: ZOELLER

Pump Model: N98 (See attached pump curve.)

Controls/Alarm Manufacturer: SJE RHOMBUS

Controls/Alarm Model: TANK ALERT AB

Float switches containing mercury are prohibited.

**SEPTIC TANK(S):**

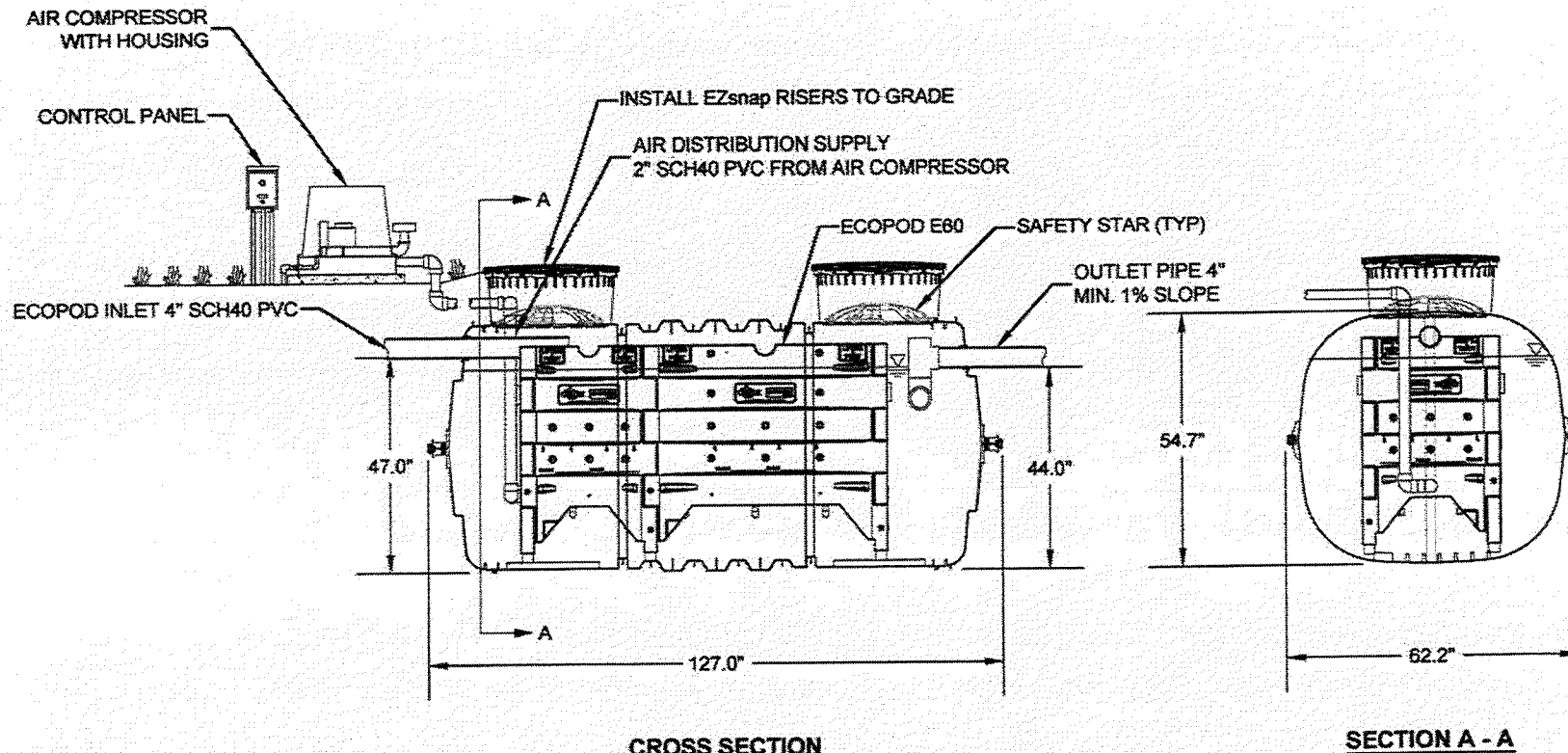
Total Volume = 1800 gal

Manufacturer(s): CONCRETE PRODUCTS, INC

Install approved effluent filter at the septic tank outlet immediately upstream of the pump tank inlet.

Filter Manufacturer: ORENCO

Filter Model: FT 0822-14



**CROSS SECTION**

**SECTION A - A**

**TABLE 1: ELECTRICAL REQUIREMENTS**

TREATMENT PLANT	E60N
COMPRESSOR	Delta Model 06
MOTOR FULL LOAD AMPS	4.8
MEASURED OPERATING WATTS	373
ELECTRICAL REQUIREMENTS	115 volt- single phase


**TABLE 2: ECOPOD SPECIFICATIONS**

TREATMENT PLANT	E60N
TREATMENT CAPACITY (GPD)	600
MIN. PRIMARY TANK VOLUME (GAL.)	600
REACTOR TANK VOLUME (GAL.)	916
MEDIA SIZE	6" X 2" X 2"
AIR REQUIREMENTS	14.4 CFM

**NOTES**

1. INSTALL TANK PER PRECASTER INSTRUCTIONS.
2. IF PRECAST DIMENSIONS ARE OUTSIDE THE MINIMUM DIMENSIONS, CONTACT DELTA FOR REVIEW.
3. FOR DESIGNS WITH TREATMENT CAPACITIES GREATER THAN 1,500 GPD, CONTACT DELTA FOR REVIEW.
4. OPTIONAL SCHEDULE 40 PVC INSERT INSTALLED TO RAISE ECOPOD TO INLET AND OUTLET HEIGHT REQUIREMENTS.

NO.	DATE	INITIALS
C	04/25/22	EAv
D	08/02/22	KJ
E	08/25/22	KJ



**Delta Treatment Systems, LLC**

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**DELTA ECOPOD E60-NIM  
INFILTRATOR IM-1060 SEPTIC TANK**

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**GENERAL ARRANGEMENT**

HORIZ. SCALE	PROJECT NO.
N.T.S.	PN
VERT. SCALE	DATE
N/A	11/17/2021
DRAWN BY	DESIGNED BY
CGK	AOB
DRAWING NO.	SHEET NO.
C0.1	01 of 01

11/17/2021 10:00 AM Delta Treatment Systems, LLC (DTS) - INFORMATION CONTAINED HEREIN IS CONFIDENTIAL AND IS THE PROPERTY OF DTS. NO PART OF THIS DRAWING SHALL BE REPRODUCED, DISTRIBUTED, DISCLOSED, OR USED BY ANY PERSON OR ORGANIZATION, IN WHOLE OR IN PART, WITHOUT THE PRIOR WRITTEN PERMISSION OF DTS. THIS INFORMATION IS BASED ON SPECIFIC INPUT PARAMETERS AND IS FOR SOLE AGENT OR PRELIMINARY USE ONLY. USE AND INTERPRETATION OF THIS INFORMATION AND DETERMINING THE APPLICABILITY TO A SPECIFIC PROJECT IS AT THE SOLE DISCRETION OF THE USER AND/OR THE ENGINEER OF RECORD.

## Mound System Maintenance and Operation Specifications

Service Provider's Name	Simac's Plumbing, LLC	Phone	715-617-9800
POWTS Regulator's Name	Vilas County Zoning	Phone	715-479-3620

### System Flow and Load Parameters

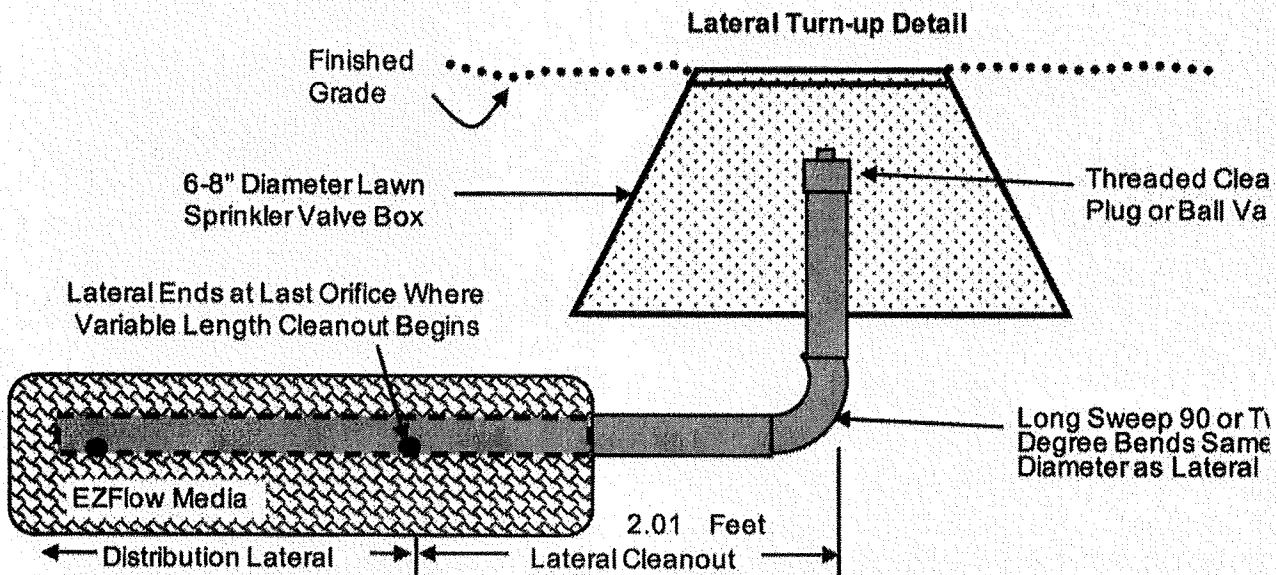
Design Flow - Peak	600	gpd	Maximum Influent Particle Size	1/8
Estimated Flow - Average	400	gpd	Maximum BOD5	30
Septic Tank Capacity	1800	gal	Maximum TSS	30
Soil Absorption Component Size	300	ft <sup>2</sup>	Maximum FOG	10
Type of Wastewater	Domestic		Maximum Fecal Colliform	10E4

### Service Frequency

Septic and Pump Tank	Inspect and/or service once every 3 years
Effluent Filter	Should inspect and clean at least once every 3 years
Pump and Controls	Test once every 3 years
Alarm	Should test monthly
Pressure System	Laterals should be flushed and pressure tested every 1.5 years
Mound	Inspect for ponding and seepage once every 3 years
Other	

### Miscellaneous Construction and Materials Standards

1. Observation pipes are slotted and materials conform to Table Comm 84.30-1, have a watertight cap, and are secured in as shown in the EZFlow mound component manual.
2. Dispersal cell media conforms to EZFlow products approved for use with the EZFlow Mound Component Manual approved 6/3/03. EZFlow media is covered with an approved geotextile fabric.
3. All gravity and pressure piping materials conform to the requirements in Comm 84, Wis. Adm. Code.
4. Tillage of the basal area is accomplished with a mold board or chisel plow.
5. The mound structure and other disturbed areas will be seeded and mulched to prevent soil erosion and help reduce frost penetration.



SOIL EVALUATION REPORT

In accordance with SPS 385, 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  
VILAS

Parcel I.D.  
8-201-03

Reviewed by [Signature] #1140271 Date 9/1/2023

Property Owner RON DAVISON				Property Location Govt. Lot 1/4 1/4 S 12 T 41 N R 9 E (or) W <input checked="" type="checkbox"/> <input type="checkbox"/>			
Property Owner's Mailing Address 103 BOEING TRL				Lot #	Block #	Subd. Name or CSM#	
City POPLAR GROVE	State IL	Zip Code 61065	Phone Number ( )	<input type="checkbox"/> City	<input type="checkbox"/> Village	<input checked="" type="checkbox"/> Town CONOVER	Nearest Road 4267 DENTON RD

New Construction Use:  Residential / Number of bedrooms 4 Code derived design flow rate 600 GPD  
 Replacement  Public or commercial - Describe: \_\_\_\_\_  
 Parent material \_\_\_\_\_ Flood Plan elevation if applicable \_\_\_\_\_ ft.  
 General comments and recommendations: Soil Hardness 90.9

**1** Boring #  Boring  Pit Ground surface elev. 94.5 ft. Depth to limiting factor 71 in.

Horizon	Depth In.	Dominant Color Munsell	Redox Description Qu. Az. Cont. Color	Texture	Structure Gr. Sz. Sh.	Consistence	Boundary	Roots	Soil Application Rate	
									GPD/Ft <sup>2</sup>	
									*Eff#1	*Eff#2
1	0-6	7.5YR 3/2		SL	2MSBK	MFR	AS	YES	.6	1.0
2	6-18	7.5YR 5/3		SL	2MSBK	MFR	CS	YES	.6	1.0
3	18-46	7.5YR 4/6		LS&G	SG	ML	CS	NO	.7	1.6
4	46-71	7.5YR 6/4		S	SG	ML	-	-	.7	1.6
	43									
	↓									
	67									

**2** Boring #  Boring  Pit Ground surface elev. 94.85 ft. Depth to limiting factor 74 in.

Horizon	Depth In.	Dominant Color Munsell	Redox Description Qu. Az. Cont. Color	Texture	Structure Gr. Sz. Sh.	Consistence	Boundary	Roots	Soil Application Rate	
									GPD/Ft <sup>2</sup>	
									*Eff#1	*Eff#2
1	0-6	7.5YR 3/2		SL	2MSBK	MFR	AS	YES	.6	1.0
2	6-18	7.5YR 5/3		SL	2MSBK	MFR	CS	YES	.6	1.0
3	18-44	7.5YR 4/6		S&G	SG	ML	CS	NO	.7	1.6
4	44-74	7.5YR 6/4		S	SG	ML	-	-	.7	1.6
	47									
	↓									
	71									

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

CST Name (Please Print) GREG SIMAC	Signature <u>[Signature]</u>	CST Number 862511
Address 1849 MCKINLEY BLVD, EAGLE RIVER, WI	Date Evaluation Conducted 9-16-2022	Telephone Number 715-617-9800

3

Boring #

Boring  
 Pit

Ground surface elev. 97.35 ft.

Depth to limiting factor 108 in.

Horizon	Depth In.	Dominant Color Munsell	Redox Description Qu. Az. Cont. Color	Texture	Structure Gr. Sz. Sh.	Consistence	Boundary	Roots	Soil Application Rate	
									GPD/F <sup>2</sup>	
									*Eff#1	*Eff#2
1	0-5	7.5YR 3/2		SL	2MSBK	MFR	AS	YES	.6	1.0
2	5-15	7.5YR 4/4		LS	1FSBK	MFR	CS	YES	.7	1.6
3	15-66	7.5YR 4/6		S&G	SG	ML	CS	NO	.7	1.6
4	66-108	7.5YR 6/4		S	SG	ML	-	-	.7	1.6

Boring #

Boring  
 Pit

Ground surface elev. \_\_\_\_\_ ft.

Depth to limiting factor \_\_\_\_\_ in.

Horizon	Depth In.	Dominant Color Munsell	Redox Description Qu. Az. Cont. Color	Texture	Structure Gr. Sz. Sh.	Consistence	Boundary	Roots	Soil Application Rate	
									GPD/F <sup>2</sup>	
									*Eff#1	*Eff#2

Boring #

Boring  
 Pit

Ground surface elev. \_\_\_\_\_ ft.

Depth to limiting factor \_\_\_\_\_ in.

Horizon	Depth In.	Dominant Color Munsell	Redox Description Qu. Az. Cont. Color	Texture	Structure Gr. Sz. Sh.	Consistence	Boundary	Roots	Soil Application Rate	
									GPD/F <sup>2</sup>	
									*Eff#1	*Eff#2

\* Effluent #1 = BOD, > 30 ≤ 220 mg/L and TSS > 30 ≤ 150 mg/L

\* Effluent #2 = BOD, > 30 ≤ 220 mg/L and TSS > 30 ≤ 150 mg/L

# SIMAC'S Plumbing LLC

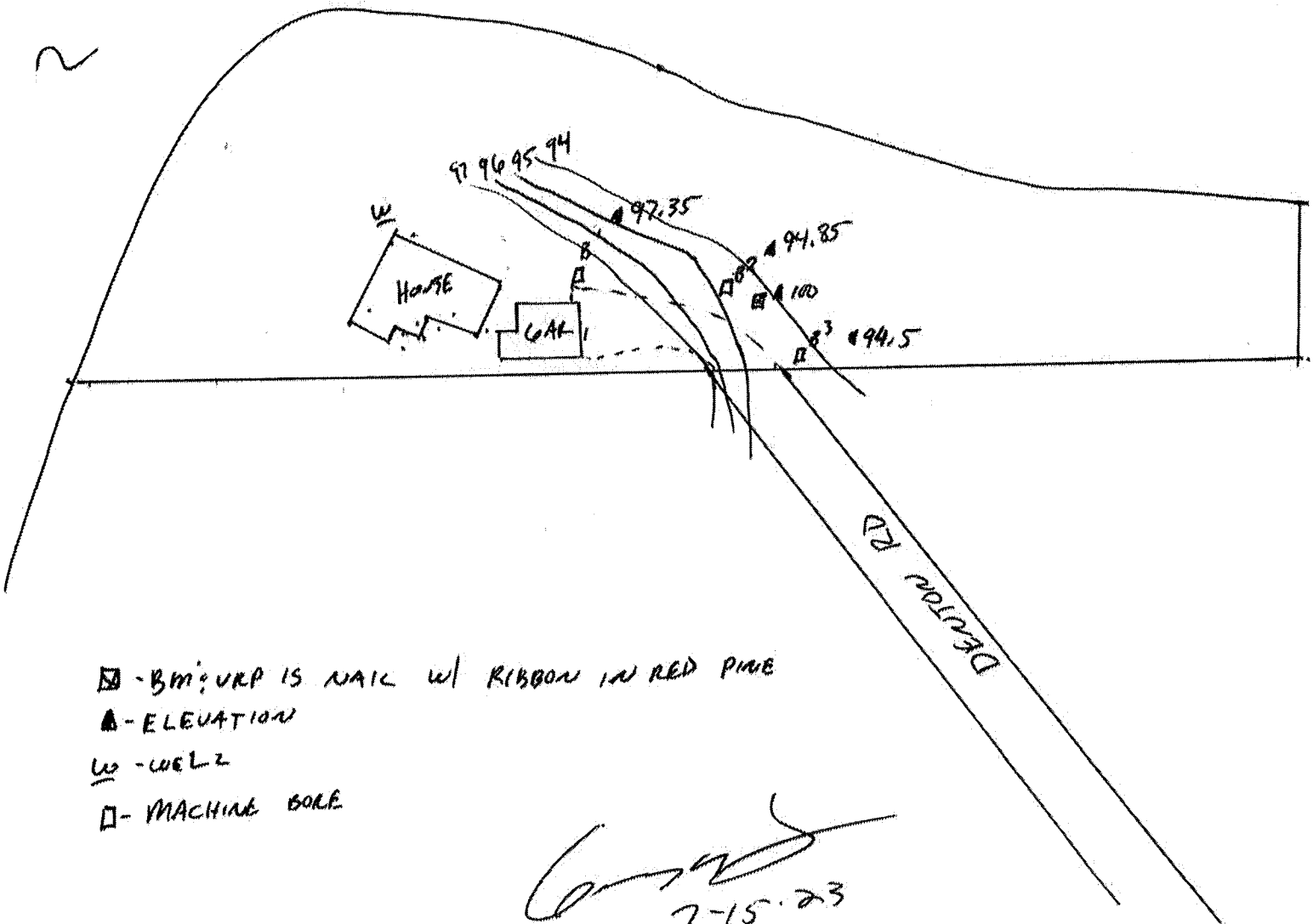
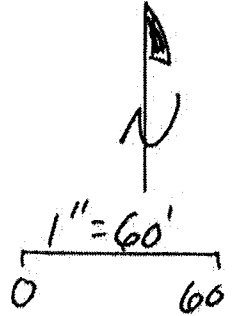
1849 McKinley Blvd. • Eagle River, WI 54521  
 (715) 617-9800 • simacsplumbing@gmail.com  
 MPRS, CST 862511

RON DAVIDSON

8-201-03

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STORMY  
LAKE  
#81



- ☐ - B.M.; URP IS NAIL W/ RIBBON IN RED PINE
- ▲ - ELEVATION
- ω - WELL
- - MACHINE BORE

*[Signature]*  
7-15-23



# Private Onsite Wastewater Treatment Systems ( POWTS) Inspection Report

(Attach to Permit)

County <b>VILAS</b>
Sanitary Permit No: <b>655401</b>
State Plan Transaction ID#: <b>082301559-C</b>
Parcel Tax No: <b>8-201-03</b>

**Safety and Buildings Division  
General Information**

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

Permit Holder's Name: **RON DAVISON**

City  Village  Town of: **CONOVERS**

1st BM Elev: **100.00**    Insp BM Elev: **100.00**    BM Description: **NAIL IN 18" RED PINE**

Tank Information		
TYPE	MANUFACTURER	CAPACITY
Septic		EXISTING
Dosing	CPI	750 gal conc
Aeration	Infiltrator	1060 gal plastic
Filter	Oruco	Biotube 8x22

Elevation Data				
STATION	BS	HI	FS	ELEV
Benchmark	-0.65	99.35		100.00
Bldg. Sewer				
St/Ht Inlet			3.30	96.05
St/Ht Outlet				
Dt Inlet			4.90	94.45
Dt Bottom			8.77	90.58
Installation Contour			8.45	90.90
Header / Man.			6.76	92.59
Dist. Pipe				
Infiltrative Surface			7.45	91.90
Final Grade			1.80	97.55
AERATOR TANK IN			4.45	94.90
AER TANK OUT			4.90	94.45
TOP OF BLOCK (4")			8.40	90.95

Tank Setback Information					
TANK TO	P/L	WELL	BLDG	VENT TO AIR INTAKE	ROAD
Septic		EXISTING			NA
Dosing	>40'	>80'	12'	24'	NA
Aeration	>40'	>80'	12'	24'	NA
Holding					

**Pump / Siphon Information**

Manufacturer	<b>Zoeller</b>		Demand
Model Number	<b>98</b>		GPM
TDH	Lift	Friction Loss	System Head
Forcemain	Length <b>3'</b>	Dia <b>2"</b>	Dist. To Well <b>&gt;80'</b>

Dispersion Cell Information					
DIMENSIONS	Width	Length	No of Cells		
SETBACK INFORMATION	P/L	Bldg	Well	OHWM of Nav Waters	
CELL TO	17'	13'		63'	

Type of System	LEACHING CHAMBER	Manufacturer:
ATU w/ sub-brand Pressure		<b>Infiltrator</b>
		Model Number:
		<b>EZ Flow</b>

**Distribution System**

Header / Manifold Length **3'** Dia **2"**    Distribution Pipe(s) Length **65'** Dia **1.5"**    Spac **3'**

X Pressure Systems Only    X Hole Size **3/16"**    X Hole Spacing **42"**    Observation Pipes  Yes  No

**Soil Cover**

Depth Over Cell Center	Depth Over Cell Edges	Depth of Topsoil	Seeded / Sodded <input type="checkbox"/> Yes <input type="checkbox"/> No	Mulched <input type="checkbox"/> Yes <input type="checkbox"/> No
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COMMENTS: (Include code discrepancies, persons present, etc.)

Onsite: Greg. Since MPDS # 862511

Delta EcoPool E60-N pre-installed in reactor tank installed per mfg instructions

Wx: Sunny, Breezy, Low 38°

Note: Aeration tank is also called "reactor" tank in mfg literature

Geotextile fabric in place

Upon excavation, it was determined that original field was not installed level, so portions of this field are 2-1 ft below original. System sand omitted from these areas but installed in all others.

Plan revision required?  Yes  No

Use other side for additional information

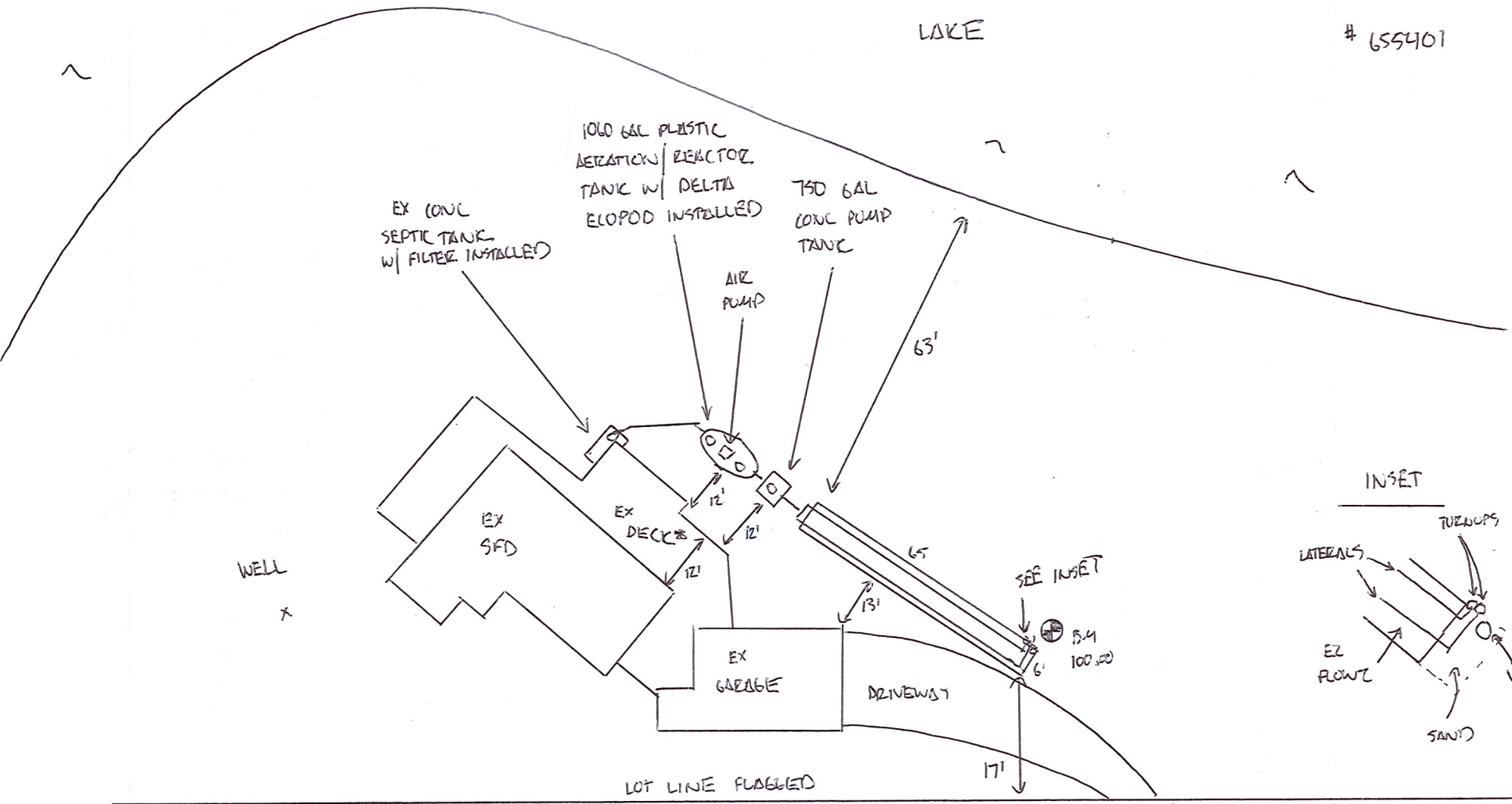
Date: **11 17 23**

POWTS Inspector's Signature:

Cert No: **11 4 0 2 3 9**

STORMY  
LAKE

↑  
N  
NOT TO SCALE  
# 655401



\*NOTE: EX DECK IS ON BLOCK AND DOES NOT HAVE FOOTINGS OR FOUNDATIONS WHICH EXTEND BELOW GRADE

DENTON RD

TO  
CTN IC  
↓