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### NOTICE AND INSPECTION REPORT

FLORENCE COUNTY Sanitary Ordinance Section 7.0 and Comm 83 and 84, Wisconsin Administrative Code and Wisconsin statutes 145.20 (2) (i) requires that owners of Private Onsite Waste Treatment Systems (POWTS) are required to participate in a Private Sewage System Maintenance and Management Program. All POWTS, shall have the septic tank pumped by a licensed pumper within three years of the date of installation and at least once every three years thereafter, or when the sludge level reaches one-third of the liquid capacity of the tank. This program requires that your septic tank (and filter if applicable) be inspected and pumped if necessary and the drain field is functioning properly. This requirement is designed to protect and improve public health safety and groundwater quality. Proper Maintenance will prolong the life of the private sewage disposal system.

JOHN B MCCAULEY  
1826 W SCHOOL FRONT HOUSE  
CHICAGO IL 60657

You have three (3) months after this notification to have the system inspected and submit the attached report which needs to be completed by an approved inspector. If you have had this system pumped within the last three (3) years, have the report completed by the approved inspector. You will be due for your next notification for inspection and pumping if needed three (3) years from that date.

Thank You.  
Rich Wolosyn, Administrator  
Trish Kelly, Assistant

### INSPECTION REPORT

Permit #: 04-100 Issued: 11/01/2004 Tax Parcel #: 010-00558-0000

Tank inspected by: \_\_\_\_\_ on \_\_\_\_\_  
(Inspector) (Date)

Tank is less than 1/3 full sludge and scum: \_\_\_\_\_  
(Yes/No)

If yes, tank will be pumped \_\_\_\_\_ Filter inspected: \_\_\_\_\_  
(Date) (Yes/No)

Tank pumped by \_\_\_\_\_ on \_\_\_\_\_  
(Pumper) (Date)

Drain Field is working properly, liquid depth at vent is \_\_\_\_\_ inches.

Is wastewater or effluent from the Private Onsite Wastetreatment System ponding on the surface of the ground? \_\_\_\_\_  
(Yes/No)

Inspector Name: \_\_\_\_\_ License #: \_\_\_\_\_

Inspector Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Owner Signature \_\_\_\_\_ Date: \_\_\_\_\_

Issue #: 04-100

Year: 2004

Issued: 11/01/2004

Sanitary System installed: 11/04/2004

Location: 1683 US HWY 2

PLEASE RETURN TO: FLORENCE COUNTY ZONING, P. O. BOX 627, FLORENCE, WI 54121

2031 Croker Road  
Eagle River, WI 54521

Dick Wilson Septic Service  
8715 Hwy G  
Argonne, WI 54511

(715) 649-3533  
Cel # (715) 902-0150

Issue # 04-100  
Year 2004

PLEASE RETURN TO: FLORENCE COUNTY ZONING, P.O. BOX 627, FLORENCE, WI 53121