

**Wood County Land & Water Conservation Department
 Animal Waste Storage Facility Ordinance
 River Block, 111 West Jackson Street, Wisconsin Rapids, WI 54495
 Phone: 715-421-8475; Fax: 715-421-8579**



Application for a Permit to Construct an Animal Waste Storage Facility

APPLICANT MAILING ADDRESSES		PROPERTY DESCRIPTION		
Applicant Name		Tax Parcel Number		
Street Address		Town	1/4	1/4
City, State, Zip Code		T	N R	E Section
Phone Number () Fax ()		Type of Construction :		
WOOD COUNTY FEE SCHEDULE		LCD USE ONLY		
50,000 gallons or less	\$150	Permit Issued:	Const. certification received:	
50,001 to 150,000 gallons	\$300	Permit denied:	Reason for denial:	
150,001 to 250,000 gallons	\$350	Permit Number:	Permit Fee:	
250,001 to 500,000 gallons	\$400	NOTES		
500,001 to 1,000,000 gallons	\$450			
1,000,001 to 5,000,000 gallons	\$600			
5,000,001 to 10,000,000 gallons	\$800			
10,000,001 gallons or greater	\$1,250			
Stand Alone Transfer System	\$200			
Closure Permit Fee	\$200			
After the Fact Permit	Double Regular Fee			
APPROVAL				
On site assistance provided? Yes <input type="checkbox"/> No <input type="checkbox"/>		By:		Date:
Attached plans reviewed by:				
Approved: Yes <input type="checkbox"/> No <input type="checkbox"/>		Name:		Title: Date:
PLAN CHECKLIST				
Does attached plan include:				
1. Number and kinds of animals for which storage is provided?		Yes <input type="checkbox"/>	No <input type="checkbox"/>	
2. The duration for which storage is provided, or daily gallons of water and manure produced?		Yes <input type="checkbox"/>	No <input type="checkbox"/>	
3. A plan view of the facility and its location in relation to buildings within 1000 feet and homes within 500 feet?		Yes <input type="checkbox"/>	No <input type="checkbox"/>	
4. Scale of drawing and north arrow?		Yes <input type="checkbox"/>	No <input type="checkbox"/>	
5. Structural details (dimensions, cross-sections, material specifications)?		Yes <input type="checkbox"/>	No <input type="checkbox"/>	
6. Location of any wells within 300 feet of the facility?		Yes <input type="checkbox"/>	No <input type="checkbox"/>	
7. Soil test, pit locations, and soil layer descriptions?		Yes <input type="checkbox"/>	No <input type="checkbox"/>	
8. Elevation of high groundwater or bedrock, and date determined?		Yes <input type="checkbox"/>	No <input type="checkbox"/>	
9. Location and distance of facility to navigable body of water (if within 1000 feet) and provisions for adequate drainage and control of runoff?		Yes <input type="checkbox"/>	No <input type="checkbox"/>	
10. Time schedule for construction of the facility?		Yes <input type="checkbox"/>	No <input type="checkbox"/>	
11. Description and construction plan of method of transfer into and from the facility?		Yes <input type="checkbox"/>	No <input type="checkbox"/>	
12. A 590 Nutrient Management Plan?		Yes <input type="checkbox"/>	No <input type="checkbox"/>	
PROPERTY OWNER'S STATEMENT				
<p>The undersigned hereby makes application for a permit to construct an animal waste facility on the property herein described. The work to be performed is described in the attached plan. The undersigned agrees that all such work shall comply with all applicable animal waste facility standards as set in the Wood County Animal Waste, Nutrient Management, and Groundwater Protection Ordinance, other applicable County Ordinances and the laws and regulations of the State of Wisconsin.</p> <p>The undersigned also agrees to certify in writing, upon installation of the facility, that the facility was installed as planned. Deviations from the original plan must be reviewed by the County Conservationist prior to installation.</p>				
Applicant Signature (landowner) _____				Date _____