

Private Onsite Wastewater Treatment Systems APPLICATION FOR REVIEW

All plans submitted for state review are now processed

-Complete all pages-

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

Department of Safety & Professional Services, Industry Services Division

For program information, check our website at http://dsps.wi.gov

Project/Site Name:			Transaction ID:			
Location, Number & Street of project (if unknown, indicated nearestroad)			Previous Related Trans. ID:			
			Estimated	Completion Date	:	
Legal Description:			Assigned Reviewer:			
County			Assigned (Office:		
☐ City ☐ Village ☐ ☐	Town of					
					nteed to be assigned ewed on a first come	
				-	l submittals are thro	
			https://esla		i subililitais are tillo	agii oui website at.
3. Complete the following avoid repeating information		sting information. Utilize t	he check boxe	s when designer,	owner or requesting	party is the same to
Designer Information (DSPS		se Specify Below	` '	DSPS
First Name	Last Name	Customer Number	First Name		Last Name	Customer Number
Company Name			Company N	lame		
Address			Address			
City	State	Zip+4 (9 digits)	City		State	Zip+4 (9 digits)
Phone Number (area code)	E-mail address	Cell phone	Phone Num (area code)		E-mail address	Cell phone
Check if applicable Owner			Check if app	plicable or specify	relationship pecify relationship	
at: https://esla.wi.gov		s. All plans submitted that an be found in each apanuals	for state revie	ew are now prod	cessed electronical	
Designer Signatur	e			TOTA	L AMOUNT DUE	•

5. POWTS SUBMITTAL (check all that apply – incomplete forms may result in processing delays) □ NEW□ REPLACEMENT ☐ Aerobic Treatment Unit(s) ☐ Chlorinator ☐ Tank Replacement Only ☐ Commercial System UV Disinfection Unit Add Effluent Filter SYSTEM TYPE(S) NOTE: Submit separate sheets for each system if submitting multiple systems on the same site **Enter Fee**

Miscellaneous Review (i.e., replacement of a septic tank, addition of an efflu	ent filter or pretreatm		\$80/hr.			
☐ Component Manual ☐ At-Grade Component Manual - Ver. 2.0, SBD-10854 (N.03/07, R. 1/12) ☐ In-ground Component Manual - Ver. 2.0, SBD-10705-P (N.01/01, R 10/12) ☐ Mound Component Manual – Ver. 2.0, SBD-10691-P (N.01/01, R 10/12)	Design Wastewater Flow in Gallons Per day	All treatment components are previously ap under s. SPS 384.10 (2) or (3): Design wastewater flow of the proposed sys				
Pressure Distribution Component Manual – Ver. 2.0, SBD-10706-P (N.01/01, R 10/12) Other - Please specify	-GPD-	1,001 – 2,000 gpd	\$ 250.00			
Soil Based Individual Site Design* At Grade Non-Pressurized In-ground Pressurized In-ground Mound Dripline Constructed Wetlands * Documentation must be provided to support treatment and dispersal claims. In a separate statement, provide rationale for the project and attach supporting documents (code sections, test reports, technical papers, research articles, etc.)	Design Wastewater Flow in Gallons Per day GPD	1,001 – 2,000 gpd 2,001 – 5,000 gpd	2) or (3): conent oduct stem: \$450.00 \$600.00 \$750.00 \$990.00			
State-owned facilities: Holding Tank Component Manual, Ver. 2.0, SBD-10855-P (N.03/07, R1/12)*	Design Wastewater Flow in Gallons Per day	Holding tanks previously approved under s. 384.10 (2)(3). Design wastewater flow of the proposed system:	SPS e			
* Non-state owned Commercial and Residential Holding tanks that completely utilize this manual and have an estimated daily flow of less than 3000 gallons per day must be submitted to the appropriate governmental unit for review instead of the Department. [see SPS 383.32(3)(a)]	GPD	5,001 – 10,000 gpd	\$ 90.00 \$150.00 \$225.00			
☐ Holding Tank Individual Site Design*, (i.e., site constructed, <5 day holding capacity, Co- mingled wastewater, etc.) Please specify: * Documentation must be provided to support the rationale for the project. In a separate statement, please include all code sections, test reports, technical papers, research articles, etc.)	Design Wastewater Flow in Gallons Per day GPD	5,001 – 10,000 gpd	2) or (3).			
Soil Saturation Determination Report (using observation pipes)	mination	(\$240.00			
Experimental System (One-time additional fee). Submit fee for individual system as per appropriate above system type) Experiment Number \$400.00						
Priority Review (enter same amount as normal review fee listed above) \$ Enter Total (rounded to the nearest dollar) \$						