

CITY OF FRANKLIN
INSPECTION SERVICES
9229 W. LOOMIS ROAD, FRANKLIN, WI 53132
(414) 425-0084, FAX (414) 425-7513

HOLDING TANKS - NEW INSTALLATIONS/REPLACEMENTS

(MUST HAVE COMMON COUNCIL APPROVAL)

ITEMS REQUIRED FOR PERMIT APPLICATION:

1. Pumping Agreement (present or new contract) — **(must be notarized, will be sent to Register of Deeds)**. LEGAL DESCRIPTION MUST BE COMPLETE! (per Bob not needed for replacement tank in same location)
2. Holding Tank Agreement (**must be notarized, will be sent to Register of Deeds**). LEGAL DESCRIPTION MUST BE COMPLETE! (Per Bob not, needed for replacement tank same location)
3. Plumbing permit application required with appropriate fee payable to "The City of Franklin". Select type of system and ground water fee **ground water fee check will be separate — see Item 5.**
4. Sanitary Permit application with State approved plans.
5. Check made out to "**Industry Services Division**" (**ground water fee**) - \$100.
6. Check made out to "**Milwaukee County Register of Deeds**" (**recording fee**) - \$30. (per Bob not needed for replacement tank in same location)

OUR 01+ 10E DOES:

1. Submit to Common Council — (complete Council Action and submit by meeting deadline). Need to give to Clerk's Office: Original Pumping Agreement; Holding Tank Agreement; Sanitary Permit Application; Common Council Action (in templates — type in info); Private Sewage Resolution (in templates — type in info). Make copies to keep in folder in our Dept. Keep permit and checks in folder until Common Council has approve&
2. After approval by Common Council and signed by City Clerk:
 - (A.) Mail Pumping Agreement, Holding Tank Agreement, and Register of Deeds cover sheet with \$30 check to: Milwaukee County Register of Deeds, 904 N. 9th Street, Room 103, Milwaukee, WI 53233. Include. Self-Addressed, Stamped Return Envelope. Once recorded, send copy to owner along with signed resolution.
 - (B.) Submit Sanitary Permit summary along with separate \$100 check for ground water fees to "Industry Services Division" (2331 San Luis Place, Green Bay, WI 54304.) Keep originals in our file.
3. Plumbing Inspector will issue permit and hard card.

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				Sanitary Permit Number (to be filled in by Co.)	
Sanitary Permit Application					
In accordance with SPS 38321(2), Wis. Adm. Code, submission of this form to the appropriate governmental unit State Transaction Number 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)(in), Stats.				Project Address (if different than mailing address)	
I. Application Information - Please Print All Information					
Property Owner's Name				Parcel #	
Property Owner's Mailing Address				Property Location Govt. Lot	
City, State		Zip Code	Phone Number		IA ^{1/4} Section T _____ N; R _____ (circle one) E or W
II. Type of Building (check all that apply)			Lot #		
<input type="checkbox"/> 1 or 2 Family Dwelling -	Number of Bedrooms	Subdivision Name			
<input type="checkbox"/> Public/Commercial - Describe	Use	Block #			
<input type="checkbox"/> State Owned - Describe	Use	CSM Number		<input type="checkbox"/> City or <input type="checkbox"/> Village of <input type="checkbox"/> Town of	
III. Type of Permit: (Check only one box on line A. Complete line B if applicable)					
A.	<input type="checkbox"/> New System	<input type="checkbox"/> Replacement System	<input type="checkbox"/> Treatment/Holding Tank Replacement Only	<input type="checkbox"/> Other Modification to Existing System (explain)	
B.	<input type="checkbox"/> Permit Renewal Before Expiration	<input type="checkbox"/> Permit Revision	<input type="checkbox"/> Change of Plumber	<input type="checkbox"/> Permit Transfer to New Owner	List Previous Permit Number and Date Issued
IV. Type of POWTS System/Component/Device: (Check all that apply)					
<input type="checkbox"/> Non-Pressurized In-Ground	<input type="checkbox"/> Pressurized In-Ground	<input type="checkbox"/> At-Grade	<input type="checkbox"/> Mound > 24 in. of suitable soil	<input type="checkbox"/> Mound < 24 in. of suitable soil	
<input type="checkbox"/> Holding Tank	<input type="checkbox"/> Other: Dispersal Component (explain)	<input type="checkbox"/> Pretreatment Device (explain)			
V. Dispersal/Treatment Area Information:					
Design Flow (gpd)	Design Soil Application Rate(gpdsf)	Dispersal Area Required (sf)	Dispersal Area Proposed (sf)	System Elevation	
VI. Tank Info	Capacity in Gallons	Total Gallons	# of Units	Manufacturer	Prefab Concrete
	New Tanks	Existing Tanks			Site Constructed
Septic or Holding Tank					Elevation
Dosing Chamber					et i a c ^{A3} LL: S a:
VII. Responsibility Statement- I, the undersigned, assume responsibility for installation of the POWTS shown on the attached plans.					
Plumber's Name (Print)		Plumber's Signature		MP/MPRS Number	Business Phone Number
Plumber's Address (Street, City, State, Zip Code)					
VIII. County/Department Use Only					
<input type="checkbox"/> Approved	<input type="checkbox"/> Disapproved	Permit Fee \$	Date Issued	Issuing Agent Signature	
	<input type="checkbox"/> Owner Given Reason for Denial				
IX. Conditions of Approval/Reasons for Disapproval					

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

Document No. / Plan Identification No.	This agreement is made between the governmental unit and holding tank owner(s)	This space reserved for recording data
Agreement Date		
County or Local Governmental Unit	Holding Tank Owner(s)	
<p style="text-align: center;"><u>(c a l l e d M u n i c i p a l i t y b e l o w)</u></p> We acknowledge that application is being made for the installation of (a) holding tank(s) on the following property: (Provide legal land description)		
		Return To

or that continued use of the existing premises requires that a holding tank be installed on the property for the purpose of proper containment of sewage. Also, the property cannot now be served by a municipal sewer, or any other type of private sewage system as permitted under Ch. ILHR 83, Wis. Adm. Code, or Ch. 145, Stats.

As an inducement to the City of Franklin to issue a sanitary permit for the above described property, we agree to do the following:

1. Owner agrees to conform to all applicable requirements of Ch. ILHR 83, Wis. Adm. Code relating to holding tanks. If the owner fails to have the holding tank properly serviced in response to orders issued by the municipality to prevent or abate a human health hazard as described in s. 254.59, Stats., the municipality may enter upon the property and service the tank or cause to have the tank to be serviced and charge the owner by placing the charges on the tax bill as a special assessment for current services rendered. The charges will be assessed as prescribed by s. 66.60, Stats.
2. The owner agrees, pursuant to s. ILHR 83.18 (10), Wis. Adm. Code, to have installed in a **new** building or **new** structure a water meter approved by the County and State. The water meter shall be installed by a plumber authorized by the State to conduct such installations, with said installation complying with State regulations and manufacturers specifications. The owner agrees to be financially responsible for the purchase, installation, maintenance, and repair of the water meter, and agrees to allow the municipality to enter the above described property on a regular basis to read and/or inspect the water meter.
3. Owner agrees to pay all charges and cost incurred by the municipality for inspection, pumping, hauling, or otherwise servicing and maintaining the holding tank in such a manner as to prevent or abate any human health hazard caused by the holding tank. The municipality shall notify the owner of any costs which shall be paid by the owner within thirty (30) days from the date of notice. In the event the owner does not pay the costs within thirty (30) days, the owner specifically agrees that all the costs and charges may be placed on the tax roll as a special assessment for the abatement of a human health hazard, and the tax shall be collected as provided by law.
4. The owner, except as provided by s. 146.20 (3) (d), Stats., agrees to contract with a person who is licensed under Ch. NR 113, Wis. Mm. Code, to have the holding tank serviced and to file a copy of the contract or the owner's registration with the municipality. The owner further agrees to file a copy of any changes to the service contract, or a copy of a new service contract, with the municipality within ten (10) business days from the date of change to the service contract.
5. The owner agrees to contract with a person licensed under Ch. NR 113, Wis. Adm. Code, who shall submit to the municipality on a semiannual basis a report in accordance with s. ILHR 83.18 (4) (a) 2., Wis. Adm. Code, for the servicing of the holding tank. In the case of registration under s. 146.20 (3) (d), Stats., the owner shall submit the report to the municipality. The municipality may enter upon the property to investigate the condition of the holding tank when pumping reports and meter readings may indicate that the holding tank is not being properly maintained.
5. This agreement will remain in effect only until the local governmental unit responsible for the regulation of private sewage systems certifies that the property is served by either a municipal sewer or a soil absorption system that complies with Ch_ ILHR 83, Wis. Adm. Code. In addition, this agreement may be cancelled by executing and recording said certification with reference to this agreement in such manner which will permit the existence of the certification to be determined by reference to the property.
7. This agreement shall be binding upon the owner, the heirs of the owner, and assignees of the owner. The owner shall submit the agreement to the register of deeds, and the agreement shall be recorded by the register of deeds in a manner which will permit the existence of the agreement to be determined by reference to the property where the holding tank is installed.

Owner(s) Name(s) - Print	Notrized Owner(s) Signature(s)	Subscribed and sworn to before me on this date:
		Date Signed
Municipal Official Name - Print	Municipal Office! Signature	Notary Signature
Municipal Official Title - Print		My commission expires:

City of Franklin Holding Tank Servicing Contract

Contract Date	This contract is made between the	
Holding Tank Owner(s) Names(s)	and	Pumper's Name

We acknowledge the installation of a holding tank(s) on the following property: (Provide legal descriptions:)

1. The owner agrees to file a copy of this contract with the local governmental unit hereinafter called the "City", which has signed the pumping agreement required in Ch. ILHR 83.18(4)(b), Wis. Adm. Code and with the City of Franklin.

The owner agrees to have the holding tank(s) serviced by the pumper and guarantees to permit the pumper to have access and to enter upon the property for the purpose of servicing the holding tank(s). The owner agrees to maintain the all-weather access road or drive so that the pumper can service the holding tank(s) with the pumping equipment. The owner further agrees to pay the pumper for all charges incurred in servicing the holding tank(s) as mutually agreed upon by the owner and pumper.

The pumper agrees to submit to the City which has signed the holding tank agreement required by S. ILHR 83.18(4)(b), Wis. Adm. Code, a report for the servicing of the holding tank(s) on a semiannual basis. The pumper further agrees to submit a report which shall include:

- a. The name and address of the person responsible for servicing the holding tank.
- b. The name of the owner of the holding tank.
- c. The location of the property on which the holding tank is installed.
- d. The sanitary permit number issued for the holding tank.
- e. The dates on which the holding tank was serviced.
- f. The volumes in gallons of the contents pumped from the holding tank for each servicing.
- g. The disposal sites to which the contents from the holding were delivered.

4. This agreement will remain in effect until the owner or pumper terminates this contract. In the event of a change in this contract, the owner agrees to file a copy of any changes to this service contract or a copy of a new service contract with the City of Franklin within ten (10) business days from the date of change to this service contract.

Owner(s) Name(s) (Print)	Owner's Signature(s)	Subscribed and sworn to me on this date:

		Today's Date
Pumper's Name (Print)	Pumper's Signature	_____
		Notary Public Signature
Pumper's Registration Number		_____
		Commission Expiration

PLEASE PRINT CLEARLY

JOB ADDRESS	SUITE or UNIT #	PROPERTY OWNER! OCCUPANT'S NAME
PLUMBERS BUSINESS NAME	PHONE NO.	MAILING ADDRESS
MAILING ADDRESS	FAX NO.	CITY STATE / ZIP
CITY / STATE / ZIP		PHONE NO.
EMAIL ADDRESS		DESCRIPTION OF WORK (Required)
MASTER PLUMBER NAME	MASTER PLUMBERS LICENSE #	

CLASS OF WORK:	<input type="radio"/> NEW CONSTRUCTION	<input type="radio"/> ADDITION	<input type="radio"/> ALTERATION
USE OF PROPERTY:	<input type="radio"/> 1 OR 2 FAMILY	<input checked="" type="radio"/> MULTI-FAMILY	<input type="checkbox"/> COMMERCIAL

Sanitary / Storm Water laterals or private mains (includes first inspection and test) ;		
Sanitary: New connection at public main		\$75.00 each
From public main or curb to termination, building	# of Feet	\$75.00 each 100 L.F. or fraction thereof
Sanitary Building Drain System	# of Feet	\$75.00 each 100 L.F. or fraction thereof
Catch Basin / Site Drain		\$50.00 each
Repair or Terminate System		\$75.00 each
Storm Sewer System: New Connection at public main		\$75.00 each
Lateral of Private Main	# of Feet	\$75.00 each 100 L.F. or fraction thereof
Storm Building Drain System	# of Feet	\$75.00 each 100 L.F. or fraction thereof
Catch Basin: <input type="checkbox"/> Parking Lot <input type="checkbox"/> Garage'		\$50.00 each
Catch Basin: <input type="checkbox"/> Yard Type		\$25.00 each
Repair or Terminate System		\$75.00 each
Water New connection at public main (Must verify with Water Department 414-421-2613)		\$75.00 each
From public main or curb to termination, building thereof. .# of Feet		\$75.00 each 100 L.F. or fraction thereof
Repair or terminated System		\$75.00 each
Street Cut (Slurry Mix Backfill) (Contact Dept of Public Works, 14-425 ¹ 2592)		\$500 per cut
Mound System		\$400.00
<input type="checkbox"/> Septic System <input type="checkbox"/> Holding Tanks <input type="checkbox"/> Private Sewage System Rehabilitation Program		\$300.00 each
GROUNDWATER Fees for POWTS: Separate Check payable to: Industry Services Division <input type="checkbox"/> Enclosed		\$100.00
POWTS on site soils verification - Call Office		\$250.00
Replacement of building water piping, sewer piping, etc.		\$60.00
Irrigation system registration (lawn Sprinklers): Submit location plans approved by Engineering		\$30.00
Check valve, backflow protection device		\$50.00 each
Well Operating Permits (5 Year Permit): <input type="checkbox"/> New <input type="checkbox"/> Renewal		<input type="checkbox"/> \$60.00 New <input type="checkbox"/> \$75.00 Renewal
<input type="checkbox"/> Well Abandonment <input type="checkbox"/> Septic Tank Abandonment		\$75.00 each
Fire Protection Sprinkler - Main Connection	# of connections	\$60.00 each connection
Multi-purpose piping systems (Plan review and Inspections)		\$150.00
Plan Review for residential water piping sizing (when required for 3 or more FULL bathrooms)		\$35.00
Plan. Review:for Private Onsite Waste Treatment Systems		\$200.00
Fixture Fee (New, ReModeled and/or capped)	# of fixtures checked (Page 2)	\$15.00 per fixture
(See Page 2 for other fees that may apply)		
		Subtotal:
MINIMUM FEE (EXCEPT BELOW)		\$60.00
REPLACEMENTS: <input type="checkbox"/> Single Fixture <input type="checkbox"/> Dishwasher <input type="checkbox"/> Gas Water Heater <input type="checkbox"/> Electric Water Heater <input type="checkbox"/> Water Softener		\$30.00 minimum
TECHNOLOGY FEE: Permit less than \$100 <input type="checkbox"/> \$4.00 Permit is greater than or equal to \$1000 <input type="checkbox"/> \$7.00		
PLUMBING PERMIT		<i>(Checks payable to City of Franklin)</i> TOTAL FEE:

CONTRACTOR'S SIGNATURE _____

DATE _____

CALL (414) 425-0084 TO SCHEDULE INSPECTIONS 24 HOURS NOTICE REQUIRED



Private Onsite Wastewater Treatment Systems (POWTS) Inspection Report

(Attach to Permit)

County
Sanitary Permit No:
State Plan Transaction ID#:
Parcel Tax No:

Industry Services Division
General Information

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

Permit Holder's Name:	CI City	0 Village	0 Town of:
CST BM Elev:	Insp BM Elev:	BM Description:	

Tank Information

TYPE	MANUFACTURER	CAPACITY
Septic		
Dosing		
Aeration		
Holding		

Elevation Data

STATION	BS	HI	FS	ELEV
Benchmark				
Bldg. Sewer				
St / Ht Inlet				
St / Ht Outlet				
Dt Inlet				
Dt Bottom				
Installation Contour				
Header / Man.				
Dist. Pipe				
Infiltrative Surface				
Final Grade				

Tank Setback Information

TANK TO	P/L	WELL	BLDG	VAIETNITZ<E	ROAD
Septic					NA
Dosing					NA
Aeration					NA
Holding					

Pump / Siphon Information

Manufacturer			Demand
Model Number			GPM
TDH Lift	Friction Loss	System Head	TDH Ft
Forcemain Length	Dia	Dist. To Well	

Dispersal Cell Information

DIMENSIONS	Width	Length	No of Cells	
SETBACK INFORMATION	P/L	Bldg	Well	CHMMofNaWates
			CELL TO	

Type of System	LEACHING CHAMBER	Manufacturer:
		Model Number:

Distribution System

Header / Manifold Length _____ Dia _____	Distribution Pipe(s) Length _____ Dia _____ Spac _____	X Hole Size	X Hole Spacing	Observation Pipes 0 Yes 0 No
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Soil Cover

Depth Over Cell Center	Depth Over Cell Edges	Depth of Topsoil	Seeded / Sodded 0 Yes 0 No	Mulched 0 Yes 0 No
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COMMENTS: (Include code discrepancies, persons present, etc.)

Plan revision required? 0 Yes 0 No

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Use other side for additional information

Date

POWTS Inspector's Signature

Cert No