

APM ePermitting Guidebook

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Quick Guide Outline for Aquatic Plant Management (APM) Permit Applications

Below are the steps to complete and submit an Aquatic Plant Management permit using the ePermitting system. More details, including screen shots are included starting on page 2.

Need Assistance?	<p>ePermitting system questions: Please email DNRAPMProgram@wi.gov or call 608-438-9919.</p> <p>Technical support: ASK FOR HELP link on your Welcome page in the ePermitting System for technical user support</p>
Website Information	Go to the Water Portal web Page , either type in “Water Permits” in the search bar on the DNR home page, or go to https://dnr.wisconsin.gov/permits/water .
WAMS ID & Logging in to the ePermitting System	<ul style="list-style-type: none"> Choose Register for a WAMS ID, <i>unless you already have a WAMS ID</i>. Return to the Water Portal webpage, choose Begin to log into the ePermitting system. Login using your WAMS ID and password You will be redirected to the “My Permit Applications” webpage. Here you can either start a new permit or edit an existing application. <ul style="list-style-type: none"> Start new application: choose Aquatic Plant Management from the list of Permit Categories along the left and move on to the Permit Application Section. Resume editing an existing application: choose the project name under either Items Awaiting Completion or Completed Items Awaiting Signature Confirmation.
Permit Application	<ul style="list-style-type: none"> Enter a project name and select your project activity. Select either Chemical Control Application for the appropriate waterbody type or Mechanical Control Application to start a new permit application. Select Chemical Treatment Record or Manual/Mechanical Control Reporting Form if you already have an approved permit and are submitting a treatment record or a NR109 control report. Using the Application, Attachments, Payment, and Sign & Submit buttons, navigate through the application process. These buttons appear just above the Project Name box. Once the Application and required Attachments are completed, select Payment.
Payment Completion	<ul style="list-style-type: none"> Choose Complete Payment at US Bank button. Payment is done through US Bank and we accept credit card, e-check, or debit card: When payment has been submitted to US Bank, US Bank will email a confirmation code to the email address provided in your payment information. Copy the confirmation code provided in the email from US Bank and paste it into the area on the Payment screen.
Sign and Submit the Application	<ul style="list-style-type: none"> Choose the Sign and Submit button. Read the Terms and Conditions and select the check box next to the signature area. This will fill in a digital signature using your WAMS ID information. Choose the Sign and Submit to DNR button to submit the permit application to DNR.
After Submitting the Application	<p>A confirmation email is sent to the email address provided in the WAMS ID, acknowledging the application has successfully been submitted to the DNR.</p> <p>The DNR has 5 business days for our Intake staff to review the permit application for completeness before assigning to a DNR employee. After the initial 5 day Intake review you may track the status of permit applications at: https://permits.dnr.wi.gov/water/SitePages/Permit%20Search.aspx. Private pond permits do not follow this same procedure. Your private pond permit may not be visible until day 15.</p>

Getting Started with the ePermitting System

1. To get to the Water Permit Water Portal Page, go to: <https://dnr.wisconsin.gov/permits/water>

At this page you can: **REGISTER** for a WAMS ID, **BEGIN** a new or edit an existing application, **VIEW** public notices of the DNR's intention to authorize activity relating to water, including permits issued to the DNR, **TRACK** the status of Wisconsin's water permits, and **WATCH** instructional training videos.

The screenshot shows the 'WATER PERMIT APPLICATIONS' page on the Wisconsin Department of Natural Resources website. The page has a blue header with the DNR logo and navigation links: HUNTING, FISHING, PARKS, CLIMATE, ENVIRONMENT, FORESTRY, LICENSES, NEWS, ABOUT, CONTACT. Below the header, there's a breadcrumb trail: Home » LICENSES. The main heading is 'WATER PERMIT APPLICATIONS'. Below it, a paragraph states: 'For some of our permits, submit applications and other forms to the DNR online. Get a WAMS ID, complete an application, sign and pay fees in a few steps. Track permits and know exactly where they are in the permitting process.' There are five action buttons: 'REGISTER' (for a WAMS ID to access the system), 'BEGIN' (a new or edit an existing application, sign and pay fees online*), 'VIEW' (public notices of the DNR's intention to authorize activity relating to water, including permits issued to the DNR), 'TRACK' (the status of Wisconsin water permits), and 'LEARN' (with instructional videos and user guides). On the right side, there's a sidebar with a blue box labeled 'Permits, Licenses and Registrations' and a 'Related Links' section containing links for 'Sales Locations', 'Resident Licenses', and 'Non-resident Licenses'. At the bottom, a footnote states: '* = WAMS ID and password needed to log in.'

If you need more information about the APM (Aquatic Plant Management) Program before getting started, please visit our webpage here: <https://dnr.wisconsin.gov/topic/lakes/plants>.

2. Choose **REGISTER** to get a WAMS ID. Then navigate back to the **Water Portal Page** to start a new permit application or work on an existing one. A WAMS ID is required for applying for permits using the ePermitting System, but it is not required to view Public Notices, or Track the status of water permits. The WAMS ID is a secure login for all State of Wisconsin programs.
3. Choose **BEGIN** to log into the ePermitting system so that you can either start a new permit application or resume editing an existing one.

4. Login using your WAMS ID by clicking the **Public Access (WAMS ID Required) – Apply for WDNR Water Permit Applications** and filling in your WAMS ID and password

Public Access Login - WAMS ID Required

User name

Password

☐ Remember me next time.

Log In

[How do I create a WAMS ID?](#)
[How do I activate my WAMS ID?](#)
[How do I change my WAMS password, email address or secret question/answer?](#)
[I forgot my WAMS ID or password](#)

5. Then you will be redirected to the **My Permit Applications** webpage. Here you can either start a new application or continue editing an existing application.
- To start new application: click **Aquatic Plant Management** from the list of Permit Categories along the left and move on to Step 6.
 - The existing permit applications will be listed under 3 categories. These categories are: **Step 1: Draft Permit Applications, Step 2: Signature Confirmation Needed, and Items Submitted to the DNR.**
 - To open an existing permit application and resume editing it, click the link under the Project Name heading under either **Step 1: Draft Permit Applications** or **Step 2: Signature Confirmation Needed.**
 - Items Submitted to the DNR** is where applications that have been submitted to DNR will appear.

Welcome to the Wisconsin DNR Water Permits Site!

- Select a permit category from the left side menu.
- Save permit application drafts for editing. Items not modified within 90 days are automatically deleted.
- Receive acknowledgement of receipt when successfully submitted to the DNR.
- Track the status of a permit by selecting Submitted Applications from the left side menu.

Large format documents: If you plan to submit an application in hard copy with documents that are larger than 11x17, please also submit a copy of the document in electronic format on digital media, such as a CD.

My Permit Applications

Step 1: Draft Permit Applications

ACTION REQUIRED: Review, edit and/or share draft permit for signature. [Instructions for a landowner and authorized representative to share a draft permit.](#)

Project Name	Applicant Full Name	Reference Number	Share Application?	Submitted
Test		PG0133 Test	Assign Role	June 13
Test		PG2744 Test	Assign Role	April 18
Test		PG1312 Test	Assign Role	May 24
Test		PG519 Test	Assign Role	June 1
Test		PG717 Test	Assign Role	June 1
Test		PG1255 Test	Assign Role	April 13
Test		PG2205 Test	Assign Role	April 4
Test		PG058 Test	Assign Role	April 20
Test		SG030 Test	Assign Role	April 14

Step 2: Signature Confirmation Needed

ACTION REQUIRED: Check WAMS email account for email instructions to complete this process. Note: if no email was received, see [instructions for resending the signature confirmation email.](#)

Project Name	Applicant Full Name	Reference Number	Date	Confirmation sent to?
There are no documents in this view.				

Permit Applications Submitted to the DNR

Note: Agents will see all signed applications they shared.

Project Name	Applicant Full Name	Reference Number	Signed By
Center Street Reconstruction	Cameron Clapper	SW GP SE 2015 65 X11 05T08 28 04	alex.ferman@dnr.wisconsin.gov
2015 LCC Chemical Aquatic Plant Control Permit	Jack Tripp	AP-IP WC 2015 32 X01 30T10 05 54	Kelsey.Brown@wisconsin.gov

Chemical Permit Application for Non-Private Sites – Lake, Pond, River (3200-004)

Navigate to the [ePermitting site](#) and select the Aquatic Plant Management permit category on the left side. The following screen will appear:

Aquatic Plant Management

NOTE: Missing or incomplete fields are highlighted at the bottom of each page. You may save, close and return to your draft permit as often as necessary to complete your application. If there are no updates in 90 days, your draft is deleted

PLEASE NOTE: You must complete the section below before continuing.

Site or Project Name:

The permit application will be saved automatically with this name

Activity

★ ▼

Before completing your APM permit application, the DNR encourages applicants to contact their local APM Contact:
http://dnr.wi.gov/lakes/contacts/Contacts.aspx?role=AP_MNGT

Home Tab

Site or Project Name:

Enter name of the waterbody site where you plan to control plants.

Activity:

Select *Chemical Control Application – Lake, River, Pond*

The permit is now saved under your drafts and the following screen will appear:

Aquatic Plant Management

NOTE: Missing or incomplete fields are highlighted at the bottom of each page. You may save, close and return to your draft permit as often as necessary to complete your application. If there are no updates in 90 days, your draft is deleted

Home Contacts Site Application Attachments Payment Signature

PLEASE NOTE: You must complete the section below before continuing.

Site or Project Name:

The permit application will be saved automatically with this name

Activity:

Eligibility:
(All questions must be no for it to be considered a private pond.)

Does the waterbody have:

- More than one property owner? ☒ Yes ☐ No
- Uncontrolled surface water discharge? ☒ Yes ☐ No
- Public access? ☒ Yes ☐ No

Before completing your APM permit application, the DNR encourages applicants to contact their local APM Contact:
https://apps.dnr.wi.gov/lakes/contacts/contacts.aspx?role=AP_MNGT

Enter previous years permit information below to import Contact Information for new application (Optional)

Permit ID #: NE-2020-12-3456

Business Certification Number: 93-123456-789123

Double Click to Import Permit

[How to locate last years permit](#)

Eligibility:

Answer questions based on the proposed control site. You must answer the questions before proceeding. Make sure you are answering the questions based on the waterbody, not the specific control site. For more information, please see [Help Section: Determining Permit Type](#).

Note: If all answers are “no”, the site is considered private and you will be automatically directed to the private pond form. Please see [Instructions for Chemical Permit Application Private Sites \(3200-155\)](#)

Enter previous years information (Optional)

To autofill the administrative information from a previous permit, enter previous permit number and your business certification number (aka business license number) and double click **Import Permit**. When the two fields turn **GREEN**, the import was successful.

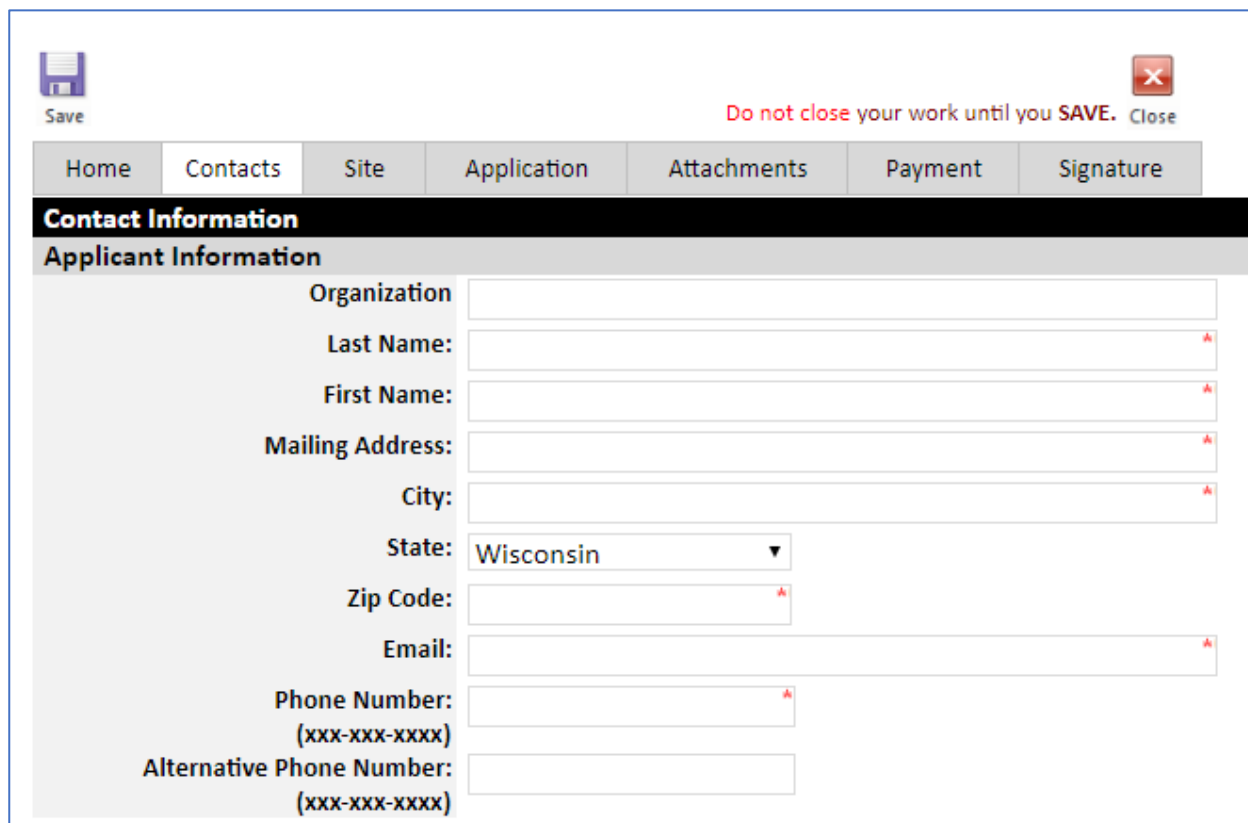
Important Note: This is case sensitive (use capital letters) and may be sensitive to extra spaces/characters before or after the number. See [Troubleshooting Permit Import](#) if you have issues.

Click **Contacts** Tab at the top to proceed.

Contacts Tab

Contact Information

NOTE: If you used the permit import feature, please check to ensure the information autopopulated accurately and correct any errors you find.



The screenshot shows a web application interface for the 'Contacts Tab'. At the top, there is a 'Save' button with a floppy disk icon and a 'Close' button with a red 'X' icon. A red warning message reads: 'Do not close your work until you SAVE. Close'. Below this is a navigation bar with tabs: 'Home', 'Contacts' (selected), 'Site', 'Application', 'Attachments', 'Payment', and 'Signature'. The main content area is titled 'Contact Information' and contains a section for 'Applicant Information'. This section includes the following fields: 'Organization' (text input), 'Last Name:' (text input with a red asterisk), 'First Name:' (text input with a red asterisk), 'Mailing Address:' (text input with a red asterisk), 'City:' (text input with a red asterisk), 'State:' (dropdown menu showing 'Wisconsin'), 'Zip Code:' (text input with a red asterisk), 'Email:' (text input with a red asterisk), 'Phone Number:' (text input with a red asterisk and a placeholder '(xxx-xxx-xxxx)'), and 'Alternative Phone Number:' (text input with a placeholder '(xxx-xxx-xxxx)').

Applicant Information

Fill out contact information for the landowner/sponsoring organization/sponsor as accurately as possible. This section should not contain any applicator company/employee information. The application will not be considered complete unless a phone and/or email address for the applicant is provided. This information is stored in our internal staff database only, so those 2 fields will appear blank on the final PDF that is visible to the public.

Fields marked with red * are required.

Waterbody Address	
Last Name:	<input type="text"/>
First Name:	<input type="text"/>
Street Address:	<input type="text"/> *
City:	<input type="text"/> *
State:	Wisconsin ▼
Zip Code:	<input type="text"/> *
Email:	<input type="text"/>
Phone Number:	<input type="text"/>
(xxx-xxx-xxxx)	
Alternative Phone Number:	<input type="text"/>
(xxx-xxx-xxxx)	

Waterbody Address

Enter waterbody contact information. Enter the most accurate address you can find for the site. If you cannot find a specific street address, enter the nearest road name/intersection or fire number. The other fields should be filled in if they differ from the applicant contact information above.

Applicator	
Name of Applicator Firm:	<input type="text"/> *
Applicator Certification #:	<input type="text"/> *
Business Location License #:	<input type="text"/> *
Restricted Use Pesticide #:	<input type="text"/>
Address:	<input type="text"/> *
City:	<input type="text"/> *
State:	Wisconsin ▼
Zip:	<input type="text"/> *
Email:	<input type="text"/> *
Phone Number:	<input type="text"/> *
(xxx-xxx-xxxx)	

Applicator

Enter applicator contact information. Valid [Applicator Certification](#) numbers must be entered for all people who will be handling pesticides (loading unsealed herbicide containers, mixing, or applying). Enter more than 1 certification number separated by commas. Enter the [Business Location License](#) number for the business that will conduct the control. The number typically begins with 93-XXXX-XXXX.

If you do not know the numbers, you can search by last name of the applicator here www.kellysolutions.com/WI/Applicators/index.asp and by business name here <http://www.kellysolutions.com/WI/Business/index.asp>.

On the rare occasion a field does not apply for your project, please enter "NA".

Adjacent Riparian Property Owners

NOTE: Phone and email address will not be publicly viewable.

☐ Uploaded riparian owners to attachment tab
 ☐ Riparian Owners Information is not applicable for this application

Name	Address	Phone	Email Address
John Smith	123 Example Road	123-456-7891	example@example.com

☒ Add Contact

Adjacent Riparian Property Owners

If you checked Yes to the previous question “Does the waterbody have more than one property owner?” you are required to enter their name(s) and address(es). Phone and email will be stored in our internal database only and hidden on the final PDF that is visible to the public. This section is also needed if there are riparian property owners within 150’ of the control site.

Check the **Uploaded riparian owners to attachment tab** box and upload a list of names and addresses as a separate file in a later tab OR fill in blanks in this section. Use the **Add Contact** button to add more fields as needed and use the red **X** button to delete rows.

If there are no riparian property owners within 150’ of the control site, you may check the box **Riparian Owners information is not applicable for this application**.

Click **Press to Refresh Missing Fields** to ensure you completed the requirements.

Click **Continue to Next Tab**

Site Tab

NOTE: If you used the permit import feature, please check to ensure the information autopopulated accurately and correct any errors you find.

Site Information - Has Missing Items	
Waterbody Containing Control Area(s)	
Waterbody Property Owners Association or Waterbody District Representative:	<input type="text"/> <input type="checkbox"/> None
Water Body Name:	<input type="text"/>
Primary County:	<input type="text"/>
Latitude:	<input type="text"/>
Longitude:	<input type="text"/>
Section:	<input type="text"/>
Township:	<input type="text"/>
Range:	<input type="text"/>
Direction:	<input type="radio"/> E <input type="radio"/> W
Waterbody Surface Area:	<input type="text"/> acres
Estimated Surface area that is 10ft or less	<input type="text"/> acres

Waterbody Containing Control Area(s)

Waterbody Property Owners' Association or Waterbody District Representative: Enter name or check the **None** box.

Waterbody Name and County:

Enter the most accurate name and primary county corresponding to the site. If not a specific waterbody, you may enter property name, wildlife area name, etc.

Latitude/Longitude:

Select a point near the center of your project that best represents the lat/long. Ensure enough digits are used for lat/long to specifically locate the site and **please use Decimal Degrees**. See [Help](#) section for assistance.

Township-Range-Section (TRS):

Select the TRS parcel that best represents the site, such as the one closest to the center. Use 2-digit numbers (01, 02, etc.) for TRS and make sure either E (east) or W (west) is selected. See [Help](#) section for assistance.

Waterbody Surface Area:

Supply the total area of contiguous lake, pond, etc. within which you are proposing to control plants. If in doubt about what can be included in a single permit, check with your APM coordinator.

Estimated Surface Area that is 10 Feet or Less in Depth:

Enter best estimate.

Proposed Control Area(s)										
Area(s) Proposed for Control:										
Site Name (Optional)	Treatment Length		Treatment Width		Estimated Acreage		Average Depth		Calculated Volume	
Site A	100	ft. x	100	ft. ÷ 43,560 ft. ² =	0.23	ac	5	ft =	1.15 ac-ft	
Site B	200	ft. x	400	ft. ÷ 43,560 ft. ² =	1.84	ac	10	ft =	18.37 ac-ft ✖	
<input checked="" type="checkbox"/> Insert item										
Estimated Acreage Grand Total					2.07 ac		Calculated Volume Grand Total			19.51 ac-ft
Is the area within or adjacent to a sensitive area designated by the Department of Natural Resources. More Information <input type="radio"/> Yes <input checked="" type="radio"/> No										

If the estimated acreage is greater than 10 acres, or is greater than 10 percent of the estimated area 10 feet or less in depth in Section II, complete and attach Form 3200-004A, Large-Scale Treatment Worksheet.

Proposed Control Area(s)

Area(s) Proposed for Control:

Determine the acreage of the waterbody in which you wish to control plants. If planning to control plants in polygons within a larger waterbody, make a best effort to enter **length**, **width**, and **depth** for each polygon and the form will calculate the acreage and provide a grand total. Use the **Insert Item** button to add more rows and use the red **X** to delete rows. Using the **Site Name** fields to give a unique name to each control area and using the same names for the polygons when creating your site map is ideal to clearly communicate your plans to the permit reviewer.

Sites such as Google Earth, WISFIRS, or the surface water data viewer ([SWDV](#)) have area measurement tools that can help you to delineate the areas within which you want to control plants. Sometimes this may include getting a best estimate of scattered control areas within a larger waterbody area.

In cases where entering the dimensions for each polygon is not feasible, enter an **estimated acreage** and leave the length and width fields blank.

****If the Grand Total is more than 10 acres, or more than 10% of the Estimated Surface Area that is 10 Feet or Less in Depth above, this is considered a large-scale treatment. (See below for additional requirements for large-scale treatments, and ensure Public Notice is uploaded under the *Attachments Tab*).**

Is this area within or adjacent to a sensitive area designated by the Department of Natural Resources?

Answer yes or no. If uncertain, you can click the More Information link, use SWDV to check using the "Critical Habitat Areas" layer feature, or contact your local APM Coordinator.

Click **Press to Refresh Missing Fields** to ensure you completed the requirements.

Click **Continue to Next Tab**

Application Tab

Chemical Aquatic Plant Control Information

Most questions are self-explanatory and are required fields. Please ensure answers are as accurate as possible.

Chemical Aquatic Plant Control Information - Form 3200-004 (R 2/17)		
Notice: Use of this form is required by the Department for any application filed pursuant to s. 281.17(2), Wis. Stats., and Chapters NR 107, 200 and 205, V requesters to the extent required by Wisconsin's Open Records Law [ss. 19.31-19.39, Wis. Stats.].		
Treatment Type: <input checked="" type="radio"/> Lake <input type="radio"/> Pond <input type="radio"/> Wetland <input type="radio"/> Marina <input type="radio"/> Other		
Has a Lake Management plan been provided to the DNR? <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Don't Know	If yes, date approved of most current copy <input type="text"/>	Link to Approved Plan: <input type="text"/>
		<input type="checkbox"/> Uploaded Plan copy as an Attachment
Does the proposed plant removal agree with the approved plan? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If NO, explain, Attach additional sheets if necessary. <input type="text"/>		

If proposing plant control in a Lake, you will need to answer questions about Lake Management Plans, which includes providing either a link or a copy uploaded to the Attachment section, if applicable.

Goal of Aquatic Plant Control:		
<input type="checkbox"/> Maintain navigation channel		
<input type="checkbox"/> Maintain boat landing and carry in access		
<input type="checkbox"/> Improve fish habitat		
<input type="checkbox"/> Maintain swimming area		
<input type="checkbox"/> Control of invasive exotics		
<input type="checkbox"/> Other		
Nuisance Caused By:		
<input type="checkbox"/> Algae		
<input type="checkbox"/> Emergent water plants (majority of leaves & stems growing above water surface, e.g. cattail, bulrushes)		
<input type="checkbox"/> Floating water plants (majority of leaves floating on water surface, e.g., water lilies, duckweed)		
<input type="checkbox"/> Submerged water plants (leaves & stems below surface, flowering parts may be exposed: milfoil, coontail)		
<input type="checkbox"/> Other		
List Target Plants		
<input type="checkbox"/> Algae	<input type="checkbox"/> Flowering Rush	<input type="checkbox"/> Purple Loosestrife
<input type="checkbox"/> Common/Glossy Buckthorn	<input type="checkbox"/> Hybrid Cattail	<input type="checkbox"/> Reed Canary Grass
<input type="checkbox"/> Coontail	<input type="checkbox"/> Hybrid Watermilfoil	<input type="checkbox"/> Reed Manna Grass
<input type="checkbox"/> Curly-Leaf Pondweed	<input type="checkbox"/> Japanese Knotweed	<input type="checkbox"/> Starry Stonewort
<input type="checkbox"/> Duckweed	<input type="checkbox"/> Naiad	<input type="checkbox"/> Yellow Floating Heart
<input type="checkbox"/> Elodea	<input type="checkbox"/> Narrow-Leaf Cattail	<input type="checkbox"/> Yellow Iris
<input type="checkbox"/> Eurasian Watermilfoil	<input type="checkbox"/> Phragmites	<input type="checkbox"/> Pondweed
Other Target Plants:		
<input type="text"/>		
<small>Note: Different plants require different chemicals for effective treatment. Do not purchase chemical before identifying plants.</small>		

Make sure you include all species you intend to control using herbicide on the site. Use the **Other Target Plants** box to enter additional species. Please use specific plant names, entries such as "All shoreline plants" or "Any invasive species" are not acceptable.

Chemical Control			
Full Trade Name of Proposed Chemical(s)			
<input type="checkbox"/> Agristar 2,4-D Amine	<input type="checkbox"/> Clipper	<input type="checkbox"/> K-Tea	<input type="checkbox"/> SCI-62
<input type="checkbox"/> Algimycin PWF	<input type="checkbox"/> Clipper SC	<input type="checkbox"/> Littora	<input type="checkbox"/> Sculpin G
<input type="checkbox"/> Alligare 2,4-D	<input type="checkbox"/> Current	<input type="checkbox"/> Milestone	<input type="checkbox"/> SeClear
<input type="checkbox"/> Alligare Argos	<input type="checkbox"/> Cutrine-Plus	<input type="checkbox"/> Nautique	<input type="checkbox"/> SeClear G
<input type="checkbox"/> Alligare Diquat	<input type="checkbox"/> Cutrine-Plus Granular	<input type="checkbox"/> Navigate	<input type="checkbox"/> Shoreklear-Plus
<input type="checkbox"/> Alligare Ecomazapyr	<input type="checkbox"/> Cutrine-Ultra	<input type="checkbox"/> Navitrol	<input type="checkbox"/> Shredder Amine
<input type="checkbox"/> Alligare Glyphosate 5.4	<input type="checkbox"/> DMA 4 IVM	<input type="checkbox"/> Navitrol DPF	<input type="checkbox"/> Sonar AS
<input type="checkbox"/> Aqua Neat	<input type="checkbox"/> Earthtec	<input type="checkbox"/> Phycomycin SCP	<input type="checkbox"/> Sonar Genesis
<input type="checkbox"/> Aqua Star	<input type="checkbox"/> Element 3A	<input type="checkbox"/> Polaris	<input type="checkbox"/> Sonar H4C
<input type="checkbox"/> AquaPro	<input type="checkbox"/> Flumioxazin 51% WDG	<input type="checkbox"/> Polaris AC	<input type="checkbox"/> Sonar PR
<input type="checkbox"/> Aquashade	<input type="checkbox"/> Formula F-30	<input type="checkbox"/> Pond-Klear	<input type="checkbox"/> Sonar Q
<input type="checkbox"/> Aquashadow	<input type="checkbox"/> Garlon 3A	<input type="checkbox"/> ProcellaCOR EC	<input type="checkbox"/> Sonar RTU
<input type="checkbox"/> Aquastrike	<input type="checkbox"/> Green Clean	<input type="checkbox"/> Refuge	<input type="checkbox"/> Sonar SRP
<input type="checkbox"/> Aquathol K	<input type="checkbox"/> Habitat	<input type="checkbox"/> Renovate 3	<input type="checkbox"/> SonarOne
<input type="checkbox"/> Aquathol Super K	<input type="checkbox"/> Harpoon	<input type="checkbox"/> Renovate LZR	<input type="checkbox"/> Stingray
<input type="checkbox"/> Avast! SC	<input type="checkbox"/> Harvester	<input type="checkbox"/> Renovate LZR Max	<input type="checkbox"/> Symmetry NXG
<input type="checkbox"/> Captain	<input type="checkbox"/> Havoc Amine	<input type="checkbox"/> Renovate Max G	<input type="checkbox"/> Touchdown Pro
<input type="checkbox"/> Captain XTR	<input type="checkbox"/> Hydrothol 191	<input type="checkbox"/> Renovate OTF	<input type="checkbox"/> Tribune
<input type="checkbox"/> Chinook	<input type="checkbox"/> Hydrothol Granular	<input type="checkbox"/> Reward	<input type="checkbox"/> Trycera
<input type="checkbox"/> Clearcast	<input type="checkbox"/> Komeen	<input type="checkbox"/> Rodeo	<input type="checkbox"/> Weedar 64
<input type="checkbox"/> Clearigate	<input type="checkbox"/> Komeen Crystal	<input type="checkbox"/> Roundup Custom	<input type="checkbox"/> Weedestroy AM-40

Other Proposed Chemical(s):

Have the proposed chemicals been permitted in a prior year on the proposed site?
☐ All ☐ Some ☐ None

What were the results of the treatment?

Method of Application: *

Other Method of Application *

Chemical Control

Full Trade Name(s) of Proposed Chemicals:

Use the checkboxes to select the herbicide(s) you plan to use. Any herbicide selected should be appropriate for the main goals of control, intended target species, and treatment scale. Applications with inaccurate/lengthy herbicide selections lacking specificity may be flagged for revision.

If a chemical is not listed, enter the full trade name under "Other" if it is registered for aquatic use in Wisconsin and that its use at the site is consistent with the site type(s) listed on the label. For instance, if a label lists canals (and that is the only wet site listed), the chemical cannot be used in a lake. Herbicides registered for use in Wisconsin can be searched here, including the labels: <http://www.kellysolutions.com/WI/pesticideindex.asp>.

Method of Application and past results:

Describe how the herbicides will be applied by choosing from the dropdown or entering a custom explanation in the Other box. Describe any past results if the site was permitted in prior years.

Alternatives to Chemical Control: Feasible?		If No, Why Not?
1. Mechanical harvesting	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2. Manual removal	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3. Sediment screens/covers	<input type="checkbox"/> Yes <input type="checkbox"/> No	
4. Dredging	<input type="checkbox"/> Yes <input type="checkbox"/> No	
5. Waterbody drawdown	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6. Nutrient controls in watershed	<input type="checkbox"/> Yes <input type="checkbox"/> No	
7. Other:	<input type="radio"/> Yes <input type="radio"/> No	

Note: If proposed treatment involves multiple properties, consider feasibility of EACH alternative for EACH property owner.

Will surface water outflow and/or overflow be controlled to prevent chemical loss?

☐ Yes ☐ No

Alternatives to Chemical Control:

Answer these appropriately and be sure to enter a reason if that alternative was not considered.

Surface water outflow be controlled?

Answer this appropriately.

Is the treatment area greater than 5% of surface area?

☒ Yes ☐ No

Waterbody concentration calculations (in ppm.)

Refer to DNR Waterbody pages <http://dnr.wi.gov/lakes> and <https://dnr.wisconsin.gov/topic/lakes/plants/forms> to answer the following:

Does the waterbody stratify? ☐ Yes ☐ No

- If yes, calculate whole waterbody concentration using volume above thermocline.
- If no, calculate whole waterbody concentration using total lake value

Herbicide Name	Other Herbicide	EPA Reg. No.	Whole Waterbody Concentration (mg/l = ppm)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

☒ Insert Herbicide

Is the treatment area greater than 5% of surface area?

Answer appropriately. If yes and your application is for control in a lake, you must calculate the whole waterbody concentration for each proposed herbicide. Use the **Insert Herbicide** button to add more rows and use the red **X** to delete rows. See [Help Section: Whole Waterbody Concentration Calculations](#) for assistance.

WPDES Permit Request

Is WPDES coverage being requested? Refer to <http://dnr.wi.gov/topic/wastewater/aquaticpesticides.html> for more information

☒ Yes - complete section VII with signature.
☐ No
☐ Already have WPDES
☐ WPDES coverage not needed

WPDES Detail

Select which permit you are requesting:
☒ WI-0064556-1 Aquatic Plants, Algae & Bacteria
☐ WI-0064564-1 Aquatic Animals
☐ WI-0064581-1 Mosquitoes & other Flying Insects

Indicate WPDES permittee responsible for the pollutant discharge:
☒ Applicator ☐ Sponsor

Do you expect the pest control activity will result in a detectable pollutant discharge to waters of the state beyond the treatment area boundary or a pollutant residual in waters of the state after the treatment project is completed?
☒ Yes ☐ No

If yes, identify the pollutant(s):

Are you planning to incorporate integrated pest management principles, as specified in the WPDES permit, into your pest control activity to minimize any pollutant residual or pollutant discharge beyond the treatment area?
☒ Yes ☐ No

Type of WPDES coverage being requested:
☒ One Treatment Site ☐ Statewide Coverage

For informational purposes, select areas of WI for most of your aquatic treatments:
☒ NE ☐ NW ☐ SW ☐ SE

Is WPDES coverage being requested for more than 1 year?
☒ Yes ☐ No

If yes, the permittee will remain in "active" WPDES status until a Notice of Termination is submitted

WPDES Permit Request

WPDES permits must comply with the Clean Water Act. Therefore, it is separate from the DNR required NR 107 permit. It has been included in this form to minimize paperwork. Chemicals applied to "waters of the state" – which includes any public or private surface water including wet sites with saturated soils – are considered a point source pollution and require permission to discharge.

It is the responsibility of the person who applies for a permit that someone involved in the treatment has WPDES coverage for their business. There is no cost for WPDES permits, and it would be valid for a period of 5 years.

WPDES permits are administered by the Wastewater Bureau. Jennifer Jerich oversees this WPDES permit for the Wisconsin DNR. See detailed information here: <https://dnr.wi.gov/topic/wastewater/aquaticpesticides.html>

Fill out the appropriate responses and click **Press to Refresh Missing Fields** to ensure you completed the requirements. Click **Attachments**.

Attachments Tab

Home	Contacts	Site	Application	Attachments	Payment	Signature
Required Attachments and Supplemental Information						
Contacts :			<input type="button" value="Edit Form"/>			
Completion Status:			Has Missing Items			
Site:			<input type="button" value="Edit Form"/>			
Completion Status:			Has Missing Items			
Chemical Aquatic Plant Control Application :			<input type="button" value="Edit Form"/>			
Completion Status:			Complete			

Check that Contacts, Site, and Chemical Aquatic Plant Control Application are marked *Complete* on this tab. If marked *Has Missing Items* as shown here, go back to the tab and enter the required fields.

Upload Required Attachments

Upload Required Attachments (15 MB per file limit) - [Help reduce file size and trouble shoot file uploads](#)
*indicates completion of this item is required
Note: To add additional attachments using the down arrow icon. To replace an existing file, use the 'Click here to attach file ' link. To remove additional items, select the item and press CNTRL Delete.

Riparian Owners	<input type="button" value="Click here to attach a file"/>	<input type="button" value="x"/>
Public Notice	<input type="button" value="Click here to attach a file"/>	<input type="button" value="x"/>
Large Scale Worksheet	<input type="button" value="Click here to attach a file"/>	<input type="button" value="x"/>
Site Map	<input type="button" value="Click here to attach a file"/>	<input type="button" value="x"/>
<input checked="" type="checkbox"/> Add another map		
Lake Management Plan	<input type="button" value="Click here to attach a file"/>	<input type="button" value="x"/>
<input checked="" type="checkbox"/> Add treatment plan		

Riparian Owners:

If you checked the box from the *Contacts Tab*, you must upload a file containing the owners list, which should include names and addresses of everyone living with 150' of the site.

Public Notice and Large-Scale Worksheet:

Required if the estimated acreage is greater than 10 OR if the estimated acreage is greater than 10% of the waterbody area that is 10 feet or less in depth. Many Non-private Ponds will need this. See [Public Notice Examples](#) for help.

Site Map:

Outline the proposed treatment area and ensure that the map includes some landmarks such as roads and access points. Indicate the direction of surface water flow out of the unit if applicable. If there is a river or creek, draw an arrow and label it as "flow". The tools used for calculating acreage can help you generate a map (e.g., <https://dnrm.wi.gov/H5/?Viewer=SWDV>).



Use the **Add another map** or **Add treatment plan** button to add any other documents you need to submit with the application. Sometimes it may be useful to include a cover letter or additional supporting documents depending on the treatment you are proposing. See [Site Map Examples](#) for help.

Lake Management Plan:

If you checked the box associated with this question from the *Application Tab*, you must upload a file containing the lake management plan.

Click the **Payment** tab at the top of the page.

Payment Tab

SaveDo not close your work until you **SAVE**.Close

HomeContactsSiteApplicationAttachmentsPaymentSignature

Fee Calculation

Chemical Control Application

1. s. NR 107.11(1), Wis. Adm. Code, lists the conditions under which the permit fee is limited to the \$20 minimum charge.

2. s. NR 107.11(4), Wis. Adm. Code, lists the uses that are exempt from permit requirements.

3. s. NR 107.04(2), Wis. Adm. Code, provides for a refund of acreage fees if the permit is denied or if no treatment occurs.

If Proposed treatment is over 0.25, calculate acreage fee:
(round up to nearest whole acre, to maximum of 50 acres)
acres X \$25 per acre = \$

2.07

\$75.00

If proposed treatment is less than 0.25 acre, acreage fee is \$0

Basic Permit Fee (non-refundable)

\$20.00

Total Fee

\$95

Pay OnlineReturn to Permit

[Fee Exempt?](#)

You can not continue to the signature page until you pay for your application.

The fee is calculated from the acreage information entered on the Site tab. Click **Pay Online** to begin the payment process and follow the instructions. Then click the **Signature** tab.

Signature Tab

Sign and Submit

Applicant Responsibilities and Certification

1 The applicant has prepared a detailed map which shows the length, width and average depth of each area proposed for the control of rooted vegetation and the surface area in acres or square feet for each proposed algae treatment.

2 The applicant understands that the Department of Natural Resources may require supervision of any aquatic plant management project involving chemicals. Under s.NR 107.07 Wis. Adm. Code, supervision may include inspection of the proposed treatment area, chemicals and application equipment before, during or after treatment. The applicant is required to notify the regional office 4 working days in advance of each anticipated treatment with the date, time, location and size of treatment unless the Department waives this requirement. Do you request the Department to waive the advance notification requirement?

☒ Yes ☐ No

3 The applicant agrees to comply with all terms or conditions of this permit, if issued, as well as all provisions of Chapter NR 107, Wis. Adm. Code. The required application fee is attached.

4 The applicant will provide a copy of the current application to any affected property owners' association inland Lake District and, in the case of chemical applications for rooted aquatic plants, to all owners of property riparian or adjacent to the treatment area. The applicant has also provided a copy of the current chemical fact sheet for the chemicals proposed for use to any affected property owner's association or inland Lake District.

5 Conditions related to invasive species movement. The applicant and operator agree to the following methods required under s.NR 109.05(2), Wis. Adm. Code for controlling, transporting and disposing of aquatic plants and animals, and moving water:

- Aquatic plants and animals shall be removed and water drained from all equipment as required by s.30.07, Wis. Stats., and ss. NR 19.055 and 40.07, Wis. Adm. Code.
- Operator shall comply with the most recent Department-approved 'Boat, Gear, and Equipment Decontamination and Disinfection Protocol', Manual Code #9183.1, available at <http://dnr.wi.gov/topic/invasives/disinfection.html>

All portions of this permit, map and accompanying cover letter must be in possession of the chemical applicator at the time of treatment. During treatment all provisions of Chapter NR 107 107.07 and NR 107.08, Wis. Adm. Code, must be complied with, as well as the specific conditions contained in the permit cover letter.

I hereby certify that the above information is true and correct and that copies of the application shall be provided to all affected property owners promptly and that the conditions of the permit will be adhered to. All portions of this permit, map and accompanying cover letter must be in possession of the applicant or their agent at time of plant removal. During plant removal activities, all provisions of applicable Wisconsin Administrative Rules must be complied with, as well as the specific conditions contained in the permit cover letter.

Steps to Complete the signature process

IMPORTANT: All email correspondence will be sent to the address associated with your WAMS ID).

1. Read and Accept the Responsibilities and Certification
2. Press the Initiate Signature Process button
3. Open the confirmation email for a one time confirmation code and instructions to complete the signature process.

You will receive a final acknowledgement email upon completing these steps.

☐ Check if you are signing as Agent for Applicant.

☒ I hereby certify that the above information is true and correct and that copies of this submittal have been provided to the appropriate parties named in the contact section and that the conditions of the permit and pesticide use will be adhered to.

Review Applicant Responsibilities and Certification items 1 – 5 before starting the signature process. You are agreeing with these statements or signifying you will/have completed them. Under item 2, you may request that APM staff not supervise the treatment, but the program may require it, in which case you would need to give notice to the regional APM staff of any application at least 4 business days before the treatment. If this is the case, your permit cover letter will specify this.

If there were one or more property owners adjacent to your treatment area, or a lake organization representative listed in section II, signing your permit indicates you have provided a copy of this permit to them. You can mail via postal service, email, or hand-deliver a copy. You can also mail a postcard containing a link to a live website where a copy of the permit application can be read in full.

The signature process has two steps. Please read the instructions carefully.

[OPTIONAL] Check the first box ONLY if you are “agent for applicant,” and see the [Assign Role Feature](#) section if you require a two-person signature process.

Check the “***I hereby certify...***” box and click ***Initiate Signature Process***. Follow prompts and you will receive an email. You will need to click the link there to **finalize** the signature process.

Chemical Control Application – Wetland (3200-012)

Navigate to the [ePermitting site](#) and select the Aquatic Plant Management permit category on the left side. The following screen will appear:

Aquatic Plant Management

NOTE: Missing or incomplete fields are highlighted at the bottom of each page. You may save, close and return to your draft permit as often as necessary to complete your application. If there are no updates in 90 days, your draft is deleted

PLEASE NOTE: You must complete the section below before continuing.

Site or Project Name:	<input type="text"/>
	<small>The permit application will be saved automatically with this name</small>
Activity	<input type="text" value="Select Activity....."/>

Before completing your APM permit application, the DNR encourages applicants to contact their local APM Contact:
http://dnr.wi.gov/lakes/contacts/Contacts.aspx?role=AP_MNGT

Home Tab

Site or Project Name:

Enter name of the wetland site where you plan to control plants.

Activity:

Select *Chemical Control Application – Wetland*

The permit is now saved under your drafts and the following screen will appear:

Aquatic Plant Management

NOTE: Missing or incomplete fields are highlighted at the bottom of each page. You may save, close and return to your draft permit as often as necessary to complete your application. If there are no updates in 90 days, your draft is deleted

Home
Contacts
Site
Application
Attachments
Payment
Signature

PLEASE NOTE: You must complete the section below before continuing.

Site or Project Name:

The permit application will be saved automatically with this name

Activity:

Before completing your APM permit application, the DNR encourages applicants to contact their local APM Contact:
https://apps.dnr.wi.gov/lakes/contacts/contacts.aspx?role=AP_MNGT

Enter previous years permit information below to import Contact Information (Optional)

Permit ID #:

Business Certification Number:

[How to locate last years permit](#)

Enter previous years information (Optional)

To autofill the administrative information from a previous permit, enter previous permit number and your business certification number (aka business license number) and double click **Import Permit**. When the two fields turn **GREEN**, the import was successful.

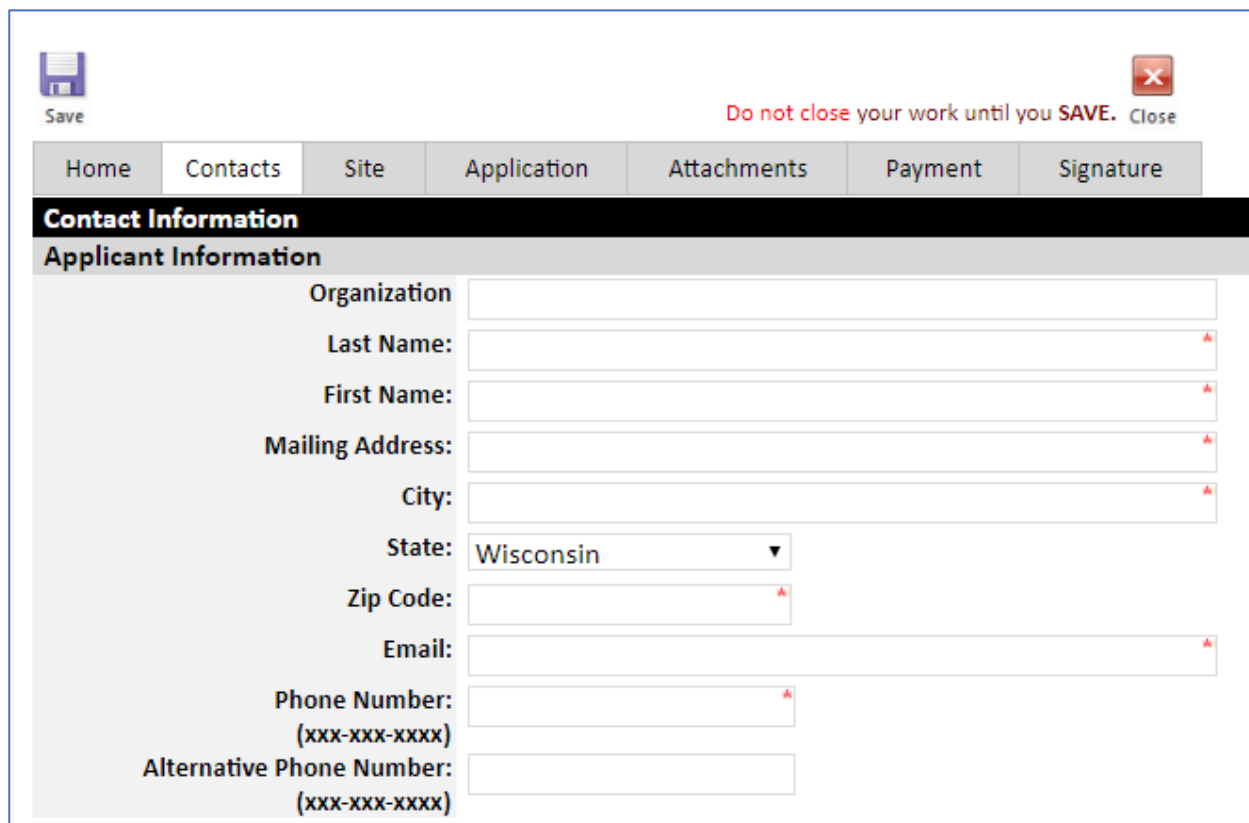
Important Note: This is case sensitive (use capital letters) and may be sensitive to extra spaces/characters before or after the number. See [Troubleshooting Permit Import](#) if you have issues.

Click **Contacts** Tab at the top to proceed.

Contacts Tab

Contact Information

NOTE: If you used the permit import feature, please check to ensure the information autopopulated accurately and correct any errors you find.



The screenshot shows a web application interface for the 'Contacts Tab'. At the top, there is a 'Save' button with a floppy disk icon and a 'Close' button with a red 'X' icon. A red warning message reads: 'Do not close your work until you SAVE. Close'. Below this is a navigation bar with tabs: 'Home', 'Contacts' (selected), 'Site', 'Application', 'Attachments', 'Payment', and 'Signature'. The main content area is titled 'Contact Information' and contains a section for 'Applicant Information'. This section includes the following fields: 'Organization' (text input), 'Last Name:' (text input with a red asterisk), 'First Name:' (text input with a red asterisk), 'Mailing Address:' (text input with a red asterisk), 'City:' (text input with a red asterisk), 'State:' (dropdown menu showing 'Wisconsin'), 'Zip Code:' (text input with a red asterisk), 'Email:' (text input with a red asterisk), 'Phone Number:' (text input with a red asterisk and a placeholder '(xxx-xxx-xxxx)'), and 'Alternative Phone Number:' (text input with a placeholder '(xxx-xxx-xxxx)').

Applicant Information

Fill out contact information for the landowner/sponsoring organization/sponsor as accurately as possible. This section should not contain any applicator company/employee information. The application will not be considered complete unless a phone and/or email address for the applicant is provided. This information is stored in our internal staff database only, so those 2 fields will appear blank on the final PDF that is visible to the public.

Fields marked with red * are required.

Wetland Address	
Last Name:	<input type="text"/>
First Name:	<input type="text"/>
Street Address:	<input type="text"/> *
City:	<input type="text"/> *
State:	Wisconsin ▼
Zip Code:	<input type="text"/> *
Email:	<input type="text"/>
Phone Number:	<input type="text"/>
	(xxx-xxx-xxxx)
Alternative Phone Number:	<input type="text"/>
	(xxx-xxx-xxxx)

Wetland Address

Enter wetland contact information. Enter the most accurate address you can find for the site. If you cannot find a specific street address, enter the nearest road name/intersection or fire number. The other fields should be filled in if they differ from the applicant contact information above.

Applicator	
Name of Applicator Firm:	<input type="text"/> *
Applicator Certification #:	<input type="text"/> *
Business Location License #:	<input type="text"/> *
Restricted Use Pesticide #:	<input type="text"/>
Address:	<input type="text"/> *
City:	<input type="text"/> *
State:	Wisconsin ▼
Zip:	<input type="text"/> *
Email:	<input type="text"/> *
Phone Number:	<input type="text"/> *
	(xxx-xxx-xxxx)

Applicator

Enter applicator contact information. Valid [Applicator Certification](#) numbers must be entered for all people who will be handling pesticides (loading unsealed herbicide containers, mixing, or applying). Enter more than 1 certification number separated by commas. Enter the [Business Location License](#) number for the business that will conduct the control. The number typically begins with 93-XXXX-XXXX.

If you do not know the numbers, you can search by last name of the applicator here www.kellysolutions.com/WI/Applicators/index.asp and by business name here <http://www.kellysolutions.com/WI/Business/index.asp>.

On the rare occasion a field does not apply for your project, please enter "NA".

Adjacent Riparian Property Owners

NOTE: Phone and email address will not be publicly viewable.

☐ Uploaded riparian owners to attachment tab
 ☐ Riparian Owners Information is not applicable for this application

Name	Address	Phone	Email Address
John Smith	123 Example Road	123-456-7891	example@example.com

☒ Add Contact

Adjacent Riparian Property Owners

If you checked Yes to the previous question “Does the waterbody have more than one property owner?” you are required to enter their name(s) and address(es). Phone and email will be stored in our internal database only and hidden on the final PDF that is visible to the public. This section is also needed if there are riparian property owners within 150’ of the control site.

Check the **Uploaded riparian owners to attachment tab** box and upload a list of names and addresses as a separate file in a later tab OR fill in blanks in this section. Use the **Add Contact** button to add more fields as needed and use the red **X** button to delete rows.

If there are no riparian property owners within 150’ of the control site, you may check the box **Riparian Owners information is not applicable for this application**.

Click **Press to Refresh Missing Fields** to ensure you completed the requirements.

Click **Continue to Next Tab**

Site Tab

NOTE: If you used the permit import feature, please check to ensure the information autopopulated accurately and correct any errors you find.

Site Information - Has Missing Items

Wetland Containing Control Area(s)

Water Body or Wetland Name:

*

Primary County:

*

▼

Latitude:

*

Longitude:

*

Section:

*

Township:

*

Range:

*

Direction:

☐ E ☐ W

Waterbody Containing Control Area(s)

Wetland Name and Primary County:

Enter the most accurate name and primary county corresponding to the site. If not a specific wetland, you may enter property name, wildlife area name, etc.

Latitude/Longitude:

Select a point near the center of your project that best represents the lat/long. Ensure enough digits are used for lat/long to specifically locate the site and **please use Decimal Degrees**. See [Help](#) section for assistance.

Township-Range-Section (TRS):

Select the TRS parcel that best represents the site, such as the one closest to the center. Use 2-digit numbers (01, 02, etc.) for TRS and make sure either E (east) or W (west) is selected. See [Help](#) section for assistance.

Proposed Control Area(s)					
Area(s) Proposed for Control:					
Site Name (Optional)	Treatment Length		Treatment Width	Estimated Acreage	County
Site A	100 ft.	x	100 ft.	$\div 43,560 \text{ ft}^2 = 0.23$ ac	Adams
Site B	200 ft.	x	400 ft.	$\div 43,560 \text{ ft}^2 = 1.84$ ac	Juneau
<input type="button" value="Insert item"/>				Estimated Acreage	2.07 ac
				Grand Total	
Is the area with in or adjacent to a sensitive area designated by the Department of Natural Resources. More Information <input type="checkbox"/> Yes <input type="checkbox"/> No					
If the estimated acreage is greater than 10 acres complete and attach Form 3200-004A, Large-Scale Treatment Worksheet.					

Proposed Control Area(s)

Area(s) Proposed for Control:

Determine the acreage of the wetland in which you wish to control plants. If planning to control plants in polygons within a larger wetland, make a best effort to enter **length** and **width** for each polygon and the form will calculate the acreage and provide a grand total. Use the **Insert Item** button to add more rows and use the red **X** to delete rows. Using the **Site Name** fields to give a unique name to each control area and using the same names for the polygons when creating your site map is ideal to clearly communicate your plans to the permit reviewer.

Sites such as Google Earth, WISFIRS, or the surface water data viewer ([SWDV](#)) have area measurement tools that can help you to delineate the wet area within which you want to control plants. Sometimes this may include getting a best estimate of scattered treatment areas within a larger wet area. Enabling the Wetland layer can help for certain wetland sites, and high ground does not need to be included since that area would not be wet.

In cases where entering the dimensions for each polygon is not feasible, enter an **estimated acreage** and leave the length and width fields blank.

If your wetland project spans multiple adjacent counties, enter the corresponding county near to each site using the dropdown menu.

****If the Grand Total is more than 10 acres, this is considered a large-scale treatment. (See below for additional requirements for large-scale treatments, and ensure Public Notice is uploaded under the *Attachments Tab*).**

Is this area within or adjacent to a sensitive area designated by the Department of Natural Resources?

Answer yes or no. If uncertain, you can click the More Information link, use SWDV to check using the "Critical Habitat Areas" layer feature, or contact your local APM Coordinator.

Click **Press to Refresh Missing Fields** to ensure you completed the requirements.

Click **Continue to Next Tab**

Application Tab

Chemical Aquatic Plant Control Information

Most questions are self-explanatory and are required fields. Please ensure answers are as accurate as possible.

Chemical Aquatic Plant Control Information- Wetland 3200-012 (4/23)		
Notice: Use of this form is required by the Department for any application filed pursuant to s. 281.17(2), Wis. Stats., and Chapters NR 107, 200 and 205, V information on this form may be provided to requesters to the extent required by Wisconsin's Open Records Law [ss. 19.31-19.39, Wis. Stats.].		
Has a management plan been provided to the DNR? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Don't Know	If Yes, date approved of most current copy <input type="text"/>	Link to Approved Plan: <input type="text"/> <input type="checkbox"/> Uploaded Plan copy as an Attachment
Does the proposed plant removal agree with the approved plan? <input type="radio"/> Yes <input type="radio"/> No		
If NO, explain. Attach additional sheets if necessary. <input type="text"/>		

You will need to answer questions about Management Plans, which includes providing either a link or a copy uploaded to the Attachment section, if applicable.

Goal of Aquatic Plant Control:		
<input type="checkbox"/> Maintain navigation channel		
<input type="checkbox"/> Maintain boat landing and carry in access		
<input type="checkbox"/> Improve fish habitat		
<input type="checkbox"/> Control of invasive exotics		
<input type="checkbox"/> Improve game habitat		
<input type="checkbox"/> Improve non-game habitat		
<input type="checkbox"/> Other		
Nuisance Caused By:		
<input type="checkbox"/> Emergent water plants (majority of leaves & stems growing above water surface, e.g. cattail, bulrushes)		
<input type="checkbox"/> Floating water plants (majority of leaves floating on water surface, e.g., water lilies, duckweed)		
<input type="checkbox"/> Submerged water plants (leaves & stems below surface, flowering parts may be exposed: milfoil, coontail)		
<input type="checkbox"/> Woody wetland plants		
<input type="checkbox"/> Other		
List Target Plants		
<input type="checkbox"/> Algae	<input type="checkbox"/> Flowering Rush	<input type="checkbox"/> Purple Loosestrife
<input type="checkbox"/> Common/Glossy Buckthorn	<input type="checkbox"/> Hybrid Cattail	<input type="checkbox"/> Reed Canary Grass
<input type="checkbox"/> Coontail	<input type="checkbox"/> Hybrid Watermilfoil	<input type="checkbox"/> Reed Manna Grass
<input type="checkbox"/> Curly-Leaf Pondweed	<input type="checkbox"/> Japanese Knotweed	<input type="checkbox"/> Starry Stonewort
<input type="checkbox"/> Duckweed	<input type="checkbox"/> Naiad	<input type="checkbox"/> Yellow Floating Heart
<input type="checkbox"/> Elodea	<input type="checkbox"/> Narrow-Leaf Cattail	<input type="checkbox"/> Yellow Iris
<input type="checkbox"/> Eurasian Watermilfoil	<input type="checkbox"/> Phragmites	<input type="checkbox"/> Pondweed
Other Target Plants:		
<input type="text"/>		

Make sure you include all species you intend to control using herbicide on the site. Use the **Other Target Plants** box to enter additional species. Please use specific plant names, entries such as "All shoreline plants" or "Any invasive species" are not acceptable.

Chemical Control			
Full Trade Name of Proposed Chemical(s)			
<input type="checkbox"/> Agristar 2,4-D Amine	<input type="checkbox"/> Clipper	<input type="checkbox"/> K-Tea	<input type="checkbox"/> SCI-62
<input type="checkbox"/> Algimycin PWF	<input type="checkbox"/> Clipper SC	<input type="checkbox"/> Littora	<input type="checkbox"/> Sculpin G
<input type="checkbox"/> Alligare 2,4-D	<input type="checkbox"/> Current	<input type="checkbox"/> Milestone	<input type="checkbox"/> SeClear
<input type="checkbox"/> Alligare Argos	<input type="checkbox"/> Cutrine-Plus	<input type="checkbox"/> Nautique	<input type="checkbox"/> SeClear G
<input type="checkbox"/> Alligare Diquat	<input type="checkbox"/> Cutrine-Plus Granular	<input type="checkbox"/> Navigate	<input type="checkbox"/> Shoreklear-Plus
<input type="checkbox"/> Alligare Ecomazapyr	<input type="checkbox"/> Cutrine-Ultra	<input type="checkbox"/> Navitrol	<input type="checkbox"/> Shredder Amine
<input type="checkbox"/> Alligare Glyphosate 5.4	<input type="checkbox"/> DMA 4 IVM	<input type="checkbox"/> Navitrol DPF	<input type="checkbox"/> Sonar AS
<input type="checkbox"/> Aqua Neat	<input type="checkbox"/> Earthtec	<input type="checkbox"/> Phycomycin SCP	<input type="checkbox"/> Sonar Genesis
<input type="checkbox"/> Aqua Star	<input type="checkbox"/> Element 3A	<input type="checkbox"/> Polaris	<input type="checkbox"/> Sonar H4C
<input type="checkbox"/> AquaPro	<input type="checkbox"/> Flumioxazin 51% WDG	<input type="checkbox"/> Polaris AC	<input type="checkbox"/> Sonar PR
<input type="checkbox"/> Aquashade	<input type="checkbox"/> Formula F-30	<input type="checkbox"/> Pond-Klear	<input type="checkbox"/> Sonar Q
<input type="checkbox"/> Aquashadow	<input type="checkbox"/> Garlon 3A	<input type="checkbox"/> ProcellaCOR EC	<input type="checkbox"/> Sonar RTU
<input type="checkbox"/> Aquastrike	<input type="checkbox"/> Green Clean	<input type="checkbox"/> Refuge	<input type="checkbox"/> Sonar SRP
<input type="checkbox"/> Aquathol K	<input type="checkbox"/> Habitat	<input type="checkbox"/> Renovate 3	<input type="checkbox"/> SonarOne
<input type="checkbox"/> Aquathol Super K	<input type="checkbox"/> Harpoon	<input type="checkbox"/> Renovate LZR	<input type="checkbox"/> Stingray
<input type="checkbox"/> Avast! SC	<input type="checkbox"/> Harvester	<input type="checkbox"/> Renovate LZR Max	<input type="checkbox"/> Symmetry NXG
<input type="checkbox"/> Captain	<input type="checkbox"/> Havoc Amine	<input type="checkbox"/> Renovate Max G	<input type="checkbox"/> Touchdown Pro
<input type="checkbox"/> Captain XTR	<input type="checkbox"/> Hydrothol 191	<input type="checkbox"/> Renovate OTF	<input type="checkbox"/> Tribune
<input type="checkbox"/> Chinook	<input type="checkbox"/> Hydrothol Granular	<input type="checkbox"/> Reward	<input type="checkbox"/> Trycera
<input type="checkbox"/> Clearcast	<input type="checkbox"/> Komeen	<input type="checkbox"/> Rodeo	<input type="checkbox"/> Weedar 64
<input type="checkbox"/> Clearigate	<input type="checkbox"/> Komeen Crystal	<input type="checkbox"/> Roundup Custom	<input type="checkbox"/> Weedestroy AM-40

Other Proposed Chemical(s):

Have the proposed chemicals been permitted in a prior year on the proposed site?
☐ All ☐ Some ☐ None

What were the results of the treatment?

Method of Application: * v

Other Method of Application *

Chemical Control

Full Trade Name(s) of Proposed Chemicals:

Use the checkboxes to select the herbicide(s) you plan to use. Any herbicide selected should be appropriate for the main goals of control, intended target species, and treatment scale. Applications with inaccurate/lengthy herbicide selections lacking specificity may be flagged for revision.

If a chemical is not listed, enter the full trade name under "Other" if it is registered for aquatic use in Wisconsin and that its use at the site is consistent with the site type(s) listed on the label. For instance, if a label lists canals (and that is the only wet site listed), the chemical cannot be used in a wetland. Herbicides registered for use in Wisconsin can be searched here, including the labels: <http://www.kellysolutions.com/WI/pesticideindex.asp>.

Method of Application and past results:

Describe how the herbicides will be applied by choosing from the dropdown or entering a custom explanation in the Other box. Describe any past results if the site was permitted in prior years.

Alternatives to Chemical Control:	Feasible?	If No, Why Not?
1. Mechanical harvesting	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2. Manual removal	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3. Sediment screens/covers	<input type="checkbox"/> Yes <input type="checkbox"/> No	
4. Dredging	<input type="checkbox"/> Yes <input type="checkbox"/> No	
5. Waterbody drawdown	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6. Nutrient controls in watershed	<input type="checkbox"/> Yes <input type="checkbox"/> No	
7. Prescribed burning	<input type="checkbox"/> Yes <input type="checkbox"/> No	
8. Waterbody manipulation to promote drowning	<input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Solarizing (tarping)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
7. Other:	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Note: If proposed treatment involves multiple properties, consider feasibility of EACH alternative for EACH property owner.

Will surface water outflow and/or overflow be controlled to prevent chemical loss?

☐ Yes ☐ No

Alternatives to Chemical Control:

Answer these appropriately and be sure to enter a reason if that alternative was not considered.

Surface water outflow be controlled?

For wetlands, answer No.

WPDES Permit Request

Is WPDES coverage being requested? Refer to <http://dnr.wi.gov/topic/wastewater/aquaticpesticides.html> for more information

☒ Yes - complete section VII with signature.

☐ No

☐ Already have WPDES

☐ WPDES coverage not needed

WPDES Detail

Select which permit you are requesting:

☒ WI-0064556-1 Aquatic Plants, Algae & Bacteria

☒ WI-0064564-1 Aquatic Animals

☒ WI-0064581-1 Mosquitoes & other Flying Insects

Indicate WPDES permittee responsible for the pollutant discharge:

☒ Applicator ☒ Sponsor

Do you expect the pest control activity will result in a detectable pollutant discharge to waters of the state beyond the treatment area boundary or a pollutant residual in waters of the state after the treatment project is completed?

☒ Yes ☒ No

If yes, identify the pollutant(s):

Are you planning to incorporate integrated pest management principles, as specified in the WPDES permit, into your pest control activity to minimize any pollutant residual or pollutant discharge beyond the treatment area?

☒ Yes ☒ No

Type of WPDES coverage being requested:

☒ One Treatment Site ☒ Statewide Coverage

For informational purposes, select areas of WI for most of your aquatic treatments:

☒ NE ☒ NW ☒ SW ☒ SE

Is WPDES coverage being requested for more than 1 year?

☒ Yes ☒ No

If yes, the permittee will remain in "active" WPDES status until a Notice of Termination is submitted

WPDES Permit Request

WPDES permits must comply with the Clean Water Act. Therefore, it is separate from the DNR required NR 107 permit. It has been included in this form to minimize paperwork. Chemicals applied to "waters of the state" – which includes any public or private surface water including wet sites with saturated soils – are considered a point source pollution and require permission to discharge.

It is the responsibility of the person who applies for a permit that someone involved in the treatment has WPDES coverage for their business. There is no cost for WPDES permits, and it would be valid for a period of 5 years.

WPDES permits are administered by the Wastewater Bureau. Jennifer Jerich oversees this WPDES permit for the Wisconsin DNR. See detailed information here: <https://dnr.wi.gov/topic/wastewater/aquaticpesticides.html>

Fill out the appropriate responses and click **Press to Refresh Missing Fields** to ensure you completed the requirements. Click **Attachments**.

Attachments Tab

Home	Contacts	Site	Application	Attachments	Payment	Signature
Required Attachments and Supplemental Information						
Contacts :			<input type="button" value="Edit Form"/>			
Completion Status:			Has Missing Items			
Site:			<input type="button" value="Edit Form"/>			
Completion Status:			Has Missing Items			
Chemical Aquatic Plant Control Application :			<input type="button" value="Edit Form"/>			
Completion Status:			Complete			

Check that Contacts, Site, and Chemical Aquatic Plant Control Application are marked *Complete* on this tab. If marked *Has Missing Items* as shown here, go back to the tab and enter the required fields.

Upload Required Attachments

Upload Required Attachments (15 MB per file limit) - [Help reduce file size and trouble shoot file uploads](#)
*indicates completion of this item is required
Note: To add additional attachments using the down arrow icon. To replace an existing file, use the 'Click here to attach file ' link. To remove additional items, select the item and press CNTRL Delete.

Riparian Owners	<input type="button" value="Click here to attach a file"/>	<input type="button" value="x"/>
Public Notice	<input type="button" value="Click here to attach a file"/>	<input type="button" value="x"/>
Large Scale Worksheet	<input type="button" value="Click here to attach a file"/>	<input type="button" value="x"/>
Site Map	<input type="button" value="Click here to attach a file"/>	<input type="button" value="x"/>
<input checked="" type="checkbox"/> Add another map		
Lake Management Plan	<input type="button" value="Click here to attach a file"/>	<input type="button" value="x"/>
<input checked="" type="checkbox"/> Add treatment plan		

Riparian Owners:

If you checked the box from the *Contacts Tab*, you are required to upload a file containing the owners list, which should include names and addresses of everyone living within 150' of the site.

Public Notice and Large-Scale Worksheet:

Required if the estimated acreage is greater than 10. See [Public Notice Examples](#) for help.

Site Map:

Outline the proposed treatment area and ensure that the map includes some landmarks such as roads and access points. Indicate the direction of surface water flow out of the unit if applicable. If there is a river or creek, draw an arrow and label it as "flow". The tools used for calculating acreage can help you generate a map (e.g., <https://dnrmaps.wi.gov/H5/?Viewer=SWDV>).



Use the **Add another map** or **Add treatment plan** button to add any other documents you need to submit with the application. Sometimes it may be useful to include a cover letter or additional supporting documents depending on the treatment you are proposing. See [Site Map Examples](#) for help.

Management Plan:

If you checked the box associated with this question from the *Application Tab*, you are required to upload a file containing the management plan.

Click the **Payment** tab at the top of the page.

Payment Tab

SaveDo not close your work until you **SAVE**.Close

HomeContactsSiteApplicationAttachmentsPaymentSignature

Fee Calculation
Chemical Control Application
1. s. NR 107.11(1), Wis. Adm. Code, lists the conditions under which the permit fee is limited to the \$20 minimum charge.
2. s. NR 107.11(4), Wis. Adm. Code, lists the uses that are exempt from permit requirements.
3. s. NR 107.04(2), Wis. Adm. Code, provides for a refund of acreage fees if the permit is denied or if no treatment occurs.

If Proposed treatment is over 0.25, calculate acreage fee:
(round up to nearest whole acre, to maximum of 50 acres)
acres X \$25 per acre = \$
If proposed treatment is less than 0.25 acre, acreage fee is \$0

Basic Permit Fee (non-refundable)	\$20.00
Total Fee	\$95

Pay OnlineReturn to Permit

[Fee Exempt?](#)

You can not continue to the signature page until you pay for your application.

The fee is calculated from the acreage information entered on the Site tab. Click **Pay Online** to begin the payment process and follow the instructions. Then click the **Signature** tab.

Signature Tab

Sign and Submit

Applicant Responsibilities and Certification

1 The applicant has prepared a detailed map which shows the length, width and average depth of each area proposed for the control of rooted vegetation and the surface area in acres or square feet for each proposed algae treatment.

2 The applicant understands that the Department of Natural Resources may require supervision of any aquatic plant management project involving chemicals. Under s.NR 107.07 Wis. Adm. Code, supervision may include inspection of the proposed treatment area, chemicals and application equipment before, during or after treatment. The applicant is required to notify the regional office 4 working days in advance of each anticipated treatment with the date, time, location and size of treatment unless the Department waives this requirement. Do you request the Department to waive the advance notification requirement?

☒ Yes ☐ No

3 The applicant agrees to comply with all terms or conditions of this permit, if issued, as well as all provisions of Chapter NR 107, Wis. Adm. Code. The required application fee is attached.

4 The applicant will provide a copy of the current application to any affected property owners' association inland Lake District and, in the case of chemical applications for rooted aquatic plants, to all owners of property riparian or adjacent to the treatment area. The applicant has also provided a copy of the current chemical fact sheet for the chemicals proposed for use to any affected property owner's association or inland Lake District.

5 Conditions related to invasive species movement. The applicant and operator agree to the following methods required under s.NR 109.05(2), Wis. Adm. Code for controlling, transporting and disposing of aquatic plants and animals, and moving water:

- Aquatic plants and animals shall be removed and water drained from all equipment as required by s.30.07, Wis. Stats., and ss. NR 19.055 and 40.07, Wis. Adm. Code.
- Operator shall comply with the most recent Department-approved 'Boat, Gear, and Equipment Decontamination and Disinfection Protocol', Manual Code #9183.1, available at <http://dnr.wi.gov/topic/invasives/disinfection.html>

All portions of this permit, map and accompanying cover letter must be in possession of the chemical applicator at the time of treatment. During treatment all provisions of Chapter NR 107 107.07 and NR 107.08, Wis. Adm. Code, must be complied with, as well as the specific conditions contained in the permit cover letter.

I hereby certify that the above information is true and correct and that copies of the application shall be provided to all affected property owners promptly and that the conditions of the permit will be adhered to. All portions of this permit, map and accompanying cover letter must be in possession of the applicant or their agent at time of plant removal. During plant removal activities, all provisions of applicable Wisconsin Administrative Rules must be complied with, as well as the specific conditions contained in the permit cover letter.

Steps to Complete the signature process

IMPORTANT: All email correspondence will be sent to the address associated with your WAMS ID).

1. Read and Accept the Responsibilities and Certification
2. Press the Initiate Signature Process button
3. Open the confirmation email for a one time confirmation code and instructions to complete the signature process.

You will receive a final acknowledgement email upon completing these steps.

☐ Check if you are signing as Agent for Applicant.

☒ I hereby certify that the above information is true and correct and that copies of this submittal have been provided to the appropriate parties named in the contact section and that the conditions of the permit and pesticide use will be adhered to.

Review Applicant Responsibilities and Certification items 1 – 5 before starting the signature process. You are agreeing with these statements or signifying you will/have completed them. Under item 2, you may request that APM staff not supervise the treatment, but the program may require it, in which case you would need to give notice to the regional APM staff of any application at least 4 business days before the treatment. If this is the case, your permit cover letter will specify this.

If there were one or more property owners adjacent to your treatment area, or a lake organization representative listed in section II, signing your permit indicates you have provided a copy of this permit to them. You can mail via postal service, email, or hand-deliver a copy. You can also mail a post-card containing a link to a live website where a copy of the permit application can be read in full.

The signature process has two steps. Please read the instructions carefully.

[OPTIONAL] Check the first box ONLY if you are “agent for applicant,” and see the [Assign Role Feature](#) section if you require a two-person signature process.

Check the “***I hereby certify...***” box and click ***Initiate Signature Process***. Follow prompts and you will receive an email. You will need to click the link there to **finalize** the signature process.

Chemical Permit Application for Private Ponds (3200-155)

Navigate to the [ePermitting site](#) and select the Aquatic Plant Management permit category on the left side. The following screen will appear:

Aquatic Plant Management

NOTE: Missing or incomplete fields are highlighted at the bottom of each page. You may save, close and return to your draft permit as often as necessary to complete your application. If there are no updates in 90 days, your draft is deleted

PLEASE NOTE: You must complete the section below before continuing.

Site or Project Name:

The permit application will be saved automatically with this name

Activity

Before completing your APM permit application, the DNR encourages applicants to contact their local APM Contact:
http://dnr.wi.gov/lakes/contacts/Contacts.aspx?role=AP_MNGT

Home Tab

Site or Project Name:

Enter name of the waterbody where you plan to control plants. It is best to use the pond owner's name here.

Activity:

Select *Chemical Control Application – Lake, River, Pond*.

The permit is now saved under your drafts and the following screen will appear:

Aquatic Plant Management

NOTE: Missing or incomplete fields are highlighted at the bottom of each page. You may save, close and return to your draft permit as often as necessary to complete your application. If there are no updates in 90 days, your draft is deleted

Home
Contacts
Site
Application
Attachments
Payment
Signature

PLEASE NOTE: You must complete the section below before continuing.

Site or Project Name:

Activity:

Eligibility:
(All questions must be no for it to be considered a private pond.)

Example Pond

The permit application will be saved automatically with this name

Chemical Control Application-Lake, River, Pond

Does the waterbody have:

- More than one property owner? ☐ Yes ☒ No
- Uncontrolled surface water discharge? ☐ Yes ☒ No
- Public access? ☐ Yes ☒ No

Before completing your APM permit application, the DNR encourages applicants to contact their local APM Contact:
https://apps.dnr.wi.gov/lakes/contacts/contacts.aspx?role=AP_MNGT

Enter previous years permit information below to import Contact Information for new application (Optional)

Permit ID #:

Business Certification Number:

NE-2020-12-3456

93-123456-789123

[How to locate last years permit](#)

Permit Import Successful – Please Proceed to Contacts Tab

Eligibility:

Answer questions based on the proposed control site. You must answer the questions before proceeding. Make sure you are answering the questions based on the waterbody, not the specific control site. For more information, please see [Help Section: Determining Permit Type](#).

Note: These must be “no” for all ponds you plan to list on the permit in order to fit the definition of a private site. If any are “yes”, the application is considered non-private and you will be automatically directed to the non-private form. Please see [Instructions for Chemical Permit Application Non-Private Sites \(3200-004\)](#)

Enter previous years information (Optional)

To autofill the administrative information from a previous permit, enter previous permit number and your business certification number (aka business license number) and double click **Import Permit**. When the two fields turn **GREEN**, the import was successful.


Important Note: This is case sensitive (use capital letters) and may be sensitive to extra spaces/characters before or after the number. See [Troubleshooting Permit Import](#) if you have issues.


Click **Contacts** Tab at the top to proceed.

Contacts Tab

Contact Information

NOTE: If you used the permit import feature, please check to ensure the information autopopulated accurately and correct any errors you find.

 Save

Do not close your work until you **SAVE.**  Close

Home Contacts Site Application Attachments Payment Signature

Contact Information

Pond Owner Information

Organization

Last Name: *

First Name: *

Mailing Address: *

City: *

State: Wisconsin ▼

Zip Code: *

Email: *

Phone Number: (xxx-xxx-xxxx) *

Alternative Phone Number: (xxx-xxx-xxxx)

Pond Owner Information

Fill out contact information for the pond owner as accurately as possible. This section should not contain any applicator company/employee information. The application will not be considered complete unless a phone and/or email address for the pond owner is provided. This information is stored in our internal staff database only, so those 2 fields will appear blank on the final PDF that is visible to the public.

Fields marked with red * are required.

Additional Contact Information	
Last Name:	<input type="text"/>
First Name:	<input type="text"/>
Street Address:	<input type="text"/>
City:	<input type="text"/>
State:	Wisconsin ▼
Zip Code:	<input type="text"/>
Email:	<input type="text"/>
Phone Number:	<input type="text"/>
(xxx-xxx-xxxx)	
Alternative Phone Number:	<input type="text"/>
(xxx-xxx-xxxx)	

Additional Contact Information

Enter additional contact information if it differs from the applicant contact information above.

Applicator	
Name of Applicator Firm:	<input type="text"/> *
Applicator Certification #:	<input type="text"/> *
Business Location License #:	<input type="text"/> *
Restricted Use Pesticide #:	<input type="text"/>
Address:	<input type="text"/> *
City:	<input type="text"/> *
State:	Wisconsin ▼
Zip:	<input type="text"/> *
Email:	<input type="text"/> *
Phone Number:	<input type="text"/> *
(xxx-xxx-xxxx)	

Applicator

Enter applicator contact information. Valid [Applicator Certification](#) numbers must be entered for all people who will be handling pesticides (loading unsealed herbicide containers, mixing, or applying). Enter more than 1 certification number separated by commas. Enter the [Business Location License](#) number for the business that will conduct the control. The number typically begins with 93-XXXX-XXXX.

If you do not know the numbers, you can search by last name of the applicator here www.kellysolutions.com/WI/Applicators/index.asp and by business name here <http://www.kellysolutions.com/WI/Business/index.asp>.

On the rare occasion a field does not apply for your project, please enter "NA".

Click **Press to Refresh Missing Fields** to ensure you completed the requirements.

Click **Continue to Next Tab**

Site Tab

NOTE: If you used the permit import feature, please check to ensure the information autopopulated accurately and correct any errors you find.

Site Information - Has Missing Items	
Waterbody Containing Control Area(s)	
Waterbody Property Owners Association or Waterbody District Representative:	<input type="text"/> <input type="checkbox"/> None
Water Body Name:	<input type="text"/>
Primary County:	<input type="text"/>
Latitude:	<input type="text"/>
Longitude:	<input type="text"/>
Section:	<input type="text"/>
Township:	<input type="text"/>
Range:	<input type="text"/>
Direction:	<input type="radio"/> E <input type="radio"/> W
Waterbody Surface Area:	<input type="text"/> acres
Estimated Surface area that is 10ft or less	<input type="text"/> acres

Waterbody Containing Control Area(s)

Waterbody Name and County:

Enter the owner's name/property name and county corresponding to the site.

Latitude/Longitude:

Enter coordinates for the center of the pond. If permitting multiple ponds, enter a lat/long for the largest pond or for a centroid point that best represents project area. Ensure enough digits are used to specifically locate the site and **please use Decimal Degrees**. See [Help](#) section for assistance.

Township-Range-Section (TRS):

Select the TRS parcel that best represents the site, such as the one closest to the center. Use 2-digit numbers (01, 02, etc.) for TRS and make sure either E (east) or W (west) is selected. See [Help](#) section for assistance.

Waterbody Surface Area:

Supply the total area of contiguous pond within which you are proposing to control plants.

Estimated Surface Area that is 10 Feet or Less in Depth:

Enter best estimate.

Proposed Control Area(s)			
Area(s) Proposed for Control:			
Site Name	Estimated Acreage		Depth (optional)
Pond A - Northwest	0.23	ac	5 ft
Pond B - Southwest	1.84	ac	6 ft
<input checked="" type="checkbox"/> Insert item			
Estimated Acreage Grand Total:		2.07	ac

Proposed Control Area(s)

Area(s) Proposed for Control:

Determine the entire acreage of the pond(s) in which you wish to control plants. Use the **Insert Item** button to add more sites if there is more than one pond. The form will automatically calculate a sum. Use the gray down-arrow button on the left side to delete rows. Using the **Site Name** fields to give a unique name to each pond and using the same names for ponds when creating your site map is ideal to clearly communicate your plans to the permit reviewer.

Sites such as Google Earth, WISFIRS, or the surface water data viewer ([SWDV](#)) have area measurement tools that can help you to delineate the pond area(s) and determine an estimated acreage for each.

Depth is an optional field that can be filled out if you choose.

Click **Press to Refresh Missing Fields** to ensure you completed the requirements.

Click **Continue to Next Tab**

Application Tab

Chemical Aquatic Plant Control Information

Most questions are self-explanatory and are required fields. Please ensure answers are as accurate as possible.

Chemical Aquatic Plant Control Information - Form 3200-155 (R 6/19)		
<small>Notice: Use of this form is required by the Department for any application filed pursuant to s. 281.17(2), Wis. Stats., and Chapters NR 107, 200 and 205, Wis. Adm. Code. This permit application is required to request coverage for pollutant discharge into waters of the state. Personally identifiable information on this form may be provided to requesters to the extent required by Wisconsin's Open Records Law [ss. 19.31-19.39, Wis. Stats.].</small>		
Nuisance Caused By:		
<input type="checkbox"/> Algae		
<input type="checkbox"/> Emergent water plants (majority of leaves & stems growing above water surface, e.g. cattail, bulrushes)		
<input type="checkbox"/> Floating water plants (majority of leaves floating on water surface, e.g., water lilies, duckweed)		
<input type="checkbox"/> Submerged water plants (leaves & stems below surface, flowering parts may be exposed: milfoil, coontail)		
<input type="checkbox"/> Other		
List Target Plants		
<input type="checkbox"/> Algae	<input type="checkbox"/> Flowering Rush	<input type="checkbox"/> Purple Loosestrife
<input type="checkbox"/> Common/Glossy Buckthorn	<input type="checkbox"/> Hybrid Cattail	<input type="checkbox"/> Reed Canary Grass
<input type="checkbox"/> Coontail	<input type="checkbox"/> Hybrid Watermilfoil	<input type="checkbox"/> Reed Manna Grass
<input type="checkbox"/> Curly-Leaf Pondweed	<input type="checkbox"/> Japanese Knotweed	<input type="checkbox"/> Starry Stonewort
<input type="checkbox"/> Duckweed	<input type="checkbox"/> Naiad	<input type="checkbox"/> Yellow Floating Heart
<input type="checkbox"/> Elodea	<input type="checkbox"/> Narrow-Leaf Cattail	<input type="checkbox"/> Yellow Iris
<input type="checkbox"/> Eurasian Watermilfoil	<input type="checkbox"/> Phragmites	<input type="checkbox"/> Pondweed
Other Target Plants:		
<div></div>		
<small>Note: Different plants require different chemicals for effective treatment. Do not purchase chemical before identifying plants.</small>		

Make sure you include all species you intend to control using herbicide on the site. Use the **Other Target Plants** box to enter additional species. Please use specific plant names, entries such as “All shoreline plants” or “Any invasive species” are not acceptable. If you are unsure about the species that will be found in the area, we recommend a site visit prior to submitting a permit.

Chemical Control			
Full Trade Name of Proposed Chemical(s)			
<input type="checkbox"/> Agristar 2,4-D Amine	<input type="checkbox"/> Clipper	<input type="checkbox"/> K-Tea	<input type="checkbox"/> SCI-62
<input type="checkbox"/> Algimycin PWF	<input type="checkbox"/> Clipper SC	<input type="checkbox"/> Littora	<input type="checkbox"/> Sculpin G
<input type="checkbox"/> Alligare 2,4-D	<input type="checkbox"/> Current	<input type="checkbox"/> Milestone	<input type="checkbox"/> SeClear
<input type="checkbox"/> Alligare Argos	<input type="checkbox"/> Cutrine-Plus	<input type="checkbox"/> Nautique	<input type="checkbox"/> SeClear G
<input type="checkbox"/> Alligare Diquat	<input type="checkbox"/> Cutrine-Plus Granular	<input type="checkbox"/> Navigate	<input type="checkbox"/> Shoreklear-Plus
<input type="checkbox"/> Alligare Ecomazapyr	<input type="checkbox"/> Cutrine-Ultra	<input type="checkbox"/> Navitrol	<input type="checkbox"/> Shredder Amine
<input type="checkbox"/> Alligare Glyphosate 5.4	<input type="checkbox"/> DMA 4 IVM	<input type="checkbox"/> Navitrol DPF	<input type="checkbox"/> Sonar AS
<input type="checkbox"/> Aqua Neat	<input type="checkbox"/> Earthtec	<input type="checkbox"/> Phycomycin SCP	<input type="checkbox"/> Sonar Genesis
<input type="checkbox"/> Aqua Star	<input type="checkbox"/> Element 3A	<input type="checkbox"/> Polaris	<input type="checkbox"/> Sonar H4C
<input type="checkbox"/> AquaPro	<input type="checkbox"/> Flumioxazin 51% WDG	<input type="checkbox"/> Polaris AC	<input type="checkbox"/> Sonar PR
<input type="checkbox"/> Aquashade	<input type="checkbox"/> Formula F-30	<input type="checkbox"/> Pond-Klear	<input type="checkbox"/> Sonar Q
<input type="checkbox"/> Aquashadow	<input type="checkbox"/> Garlon 3A	<input type="checkbox"/> ProcellaCOR EC	<input type="checkbox"/> Sonar RTU
<input type="checkbox"/> Aquastrike	<input type="checkbox"/> Green Clean	<input type="checkbox"/> Refuge	<input type="checkbox"/> Sonar SRP
<input type="checkbox"/> Aquathol K	<input type="checkbox"/> Habitat	<input type="checkbox"/> Renovate 3	<input type="checkbox"/> SonarOne
<input type="checkbox"/> Aquathol Super K	<input type="checkbox"/> Harpoon	<input type="checkbox"/> Renovate LZR	<input type="checkbox"/> Stingray
<input type="checkbox"/> Avast! SC	<input type="checkbox"/> Harvester	<input type="checkbox"/> Renovate LZR Max	<input type="checkbox"/> Symmetry NXG
<input type="checkbox"/> Captain	<input type="checkbox"/> Havoc Amine	<input type="checkbox"/> Renovate Max G	<input type="checkbox"/> Touchdown Pro
<input type="checkbox"/> Captain XTR	<input type="checkbox"/> Hydrothol 191	<input type="checkbox"/> Renovate OTF	<input type="checkbox"/> Tribune
<input type="checkbox"/> Chinook	<input type="checkbox"/> Hydrothol Granular	<input type="checkbox"/> Reward	<input type="checkbox"/> Trycera
<input type="checkbox"/> Clearcast	<input type="checkbox"/> Komeen	<input type="checkbox"/> Rodeo	<input type="checkbox"/> Weedar 64
<input type="checkbox"/> Clearigate	<input type="checkbox"/> Komeen Crystal	<input type="checkbox"/> Roundup Custom	<input type="checkbox"/> Weedestroy AM-40
Other Proposed Chemical(s): <input type="text"/>			
Have the proposed chemicals been permitted in a prior year on the proposed site? <input type="checkbox"/> All <input type="checkbox"/> Some <input type="checkbox"/> None			
What were the results of the treatment? <input type="text"/>			
Method of Application: <input type="text" value="Select pre-defined or type in an other value..."/> <input type="button" value="v"/>			
Other Method of Application <input type="text"/>			

Chemical Control

Full Trade Name(s) of Proposed Chemicals:

Use the checkboxes to select the herbicide(s) you plan to use. Any herbicide selected should be appropriate for the overarching goals of control, intended target species, and treatment scale.

If a chemical is not listed, enter the full trade name under "Other" if it is registered for aquatic use in Wisconsin and that its use at the site is consistent with the site type(s) listed on the label. For instance, if a label lists canals (and that is the only wet site listed), the chemical cannot be used in a pond. Herbicides registered for use in Wisconsin can be searched here, including the labels: <http://www.kellysolutions.com/WI/pesticideindex.asp>.

Method of Application and past results:

Describe how the herbicides will be applied by choosing from the dropdown or entering a custom explanation in the Other box. Describe any past results if the site was permitted in prior years.

WPDES Permit Request

Is WPDES coverage being requested? Refer to <http://dnr.wi.gov/topic/wastewater/aquaticpesticides.html> for more information

☒ Yes - complete section VII with signature.
☐ No
☐ Already have WPDES
☐ WPDES coverage not needed

WPDES Detail

Select which permit you are requesting:

☒ WI-0064556-1 Aquatic Plants, Algae & Bacteria
☒ WI-0064564-1 Aquatic Animals
☒ WI-0064581-1 Mosquitoes & other Flying Insects

Indicate WPDES permittee responsible for the pollutant discharge:

☒ Applicator ☒ Sponsor

Do you expect the pest control activity will result in a detectable pollutant discharge to waters of the state beyond the treatment area boundary or a pollutant residual in waters of the state after the treatment project is completed?

☒ Yes ☒ No

If yes, identify the pollutant(s):

Are you planning to incorporate integrated pest management principles, as specified in the WPDES permit, into your pest control activity to minimize any pollutant residual or pollutant discharge beyond the treatment area?

☒ Yes ☒ No

Type of WPDES coverage being requested:

☒ One Treatment Site ☒ Statewide Coverage

For informational purposes, select areas of WI for most of your aquatic treatments:

☒ NE ☒ NW ☒ SW ☒ SE

Is WPDES coverage being requested for more than 1 year?

☒ Yes ☒ No

If yes, the permittee will remain in "active" WPDES status until a Notice of Termination is submitted

WPDES Permit Request

WPDES permits must comply with the Clean Water Act. Therefore, it is separate from the DNR required NR 107 permit. It has been included in this form to minimize paperwork. Chemicals applied to "waters of the state" – which includes any public or private surface water including wet sites with saturated soils – are considered a point source pollution and require permission to discharge.

It is the responsibility of the person who applies for a permit that someone involved in the treatment has WPDES coverage for their business. There is no cost for WPDES permits, and it would be valid for a period of 5 years.

WPDES permits are administered by the Wastewater Bureau. Jennifer Jerich oversees this WPDES permit for the Wisconsin DNR. See detailed information here: <https://dnr.wi.gov/topic/wastewater/aquaticpesticides.html>

Fill out the appropriate responses and click **Press to Refresh Missing Fields** to ensure you completed the requirements. Click **Attachments**.


Attachments Tab

Home	Contacts	Site	Application	Attachments	Payment	Signature
Required Attachments and Supplemental Information						
Contacts :			<input type="button" value="Edit Form"/>			
Completion Status:			<div>Has Missing Items</div>			
Site:			<input type="button" value="Edit Form"/>			
Completion Status:			<div>Has Missing Items</div>			
Chemical Aquatic Plant Control Application :			<input type="button" value="Edit Form"/>			
Completion Status:			<div>Complete</div>			


Check that Contacts, Site, and Chemical Aquatic Plant Control Application are marked *Complete* on this tab. If marked *Has Missing Items* as shown here, go back to the tab and enter the required fields.

Upload Required Attachments (15 MB per file limit) -
[Help reduce file size and trouble shoot file uploads](#)
**indicates completion of this item is required*
Note: To add additional attachments using the down arrow icon. To replace an existing file, use the 'Click here to attach file' link. To remove additional items, select the item and press CNTRL Delete.

Riparian Owners



Site Map



☒ Add another map

Upload Required Attachments

Site Map:

Outline the proposed treatment area and ensure that the map includes some landmarks such as roads and access points. The tools used for calculating acreage can help you generate a map (e.g., <https://dnrm.wi.gov/H5/?Viewer=SWDV>).

Use the **Add another map** button to add any other documents you need to submit with the application. Sometimes it may be useful to include a cover letter or additional supporting documents depending on the treatment you are proposing.

Click the **Payment** tab at the top of the page.

Payment Tab

There is a \$20 base application fee. Click **Pay Online** to begin the payment process and follow the instructions. Then click the **Signature** tab.

Signature Tab

Sign and Submit

Applicant Responsibilities and Certification

- 1 The applicant has prepared a detailed map which shows the length, width and average depth of each area proposed for the control of rooted vegetation and the surface area in acres or square feet for each proposed algae treatment.
- 2 The applicant understands that the Department of Natural Resources may require supervision of any aquatic plant management project involving chemicals. Under s.NR 107.07 Wis. Adm. Code, supervision may include inspection of the proposed treatment area, chemicals and application equipment before, during or after treatment. The applicant is required to notify the regional office 4 working days in advance of each anticipated treatment with the date, time, location and size of treatment unless the Department waives this requirement. Do you request the Department to waive the advance notification requirement?

☒ Yes ☐ No
- 3 The applicant agrees to comply with all terms or conditions of this permit, if issued, as well as all provisions of Chapter NR 107, Wis. Adm. Code. The required application fee is attached.
- 4 The applicant will provide a copy of the current application to any affected property owners' association inland Lake District and, in the case of chemical applications for rooted aquatic plants, to all owners of property riparian or adjacent to the treatment area. The applicant has also provided a copy of the current chemical fact sheet for the chemicals proposed for use to any affected property owner's association or inland Lake District.
- 5 Conditions related to invasive species movement. The applicant and operator agree to the following methods required under s.NR 109.05(2), Wis. Adm. Code for controlling, transporting and disposing of aquatic plants and animals, and moving water:
 - Aquatic plants and animals shall be removed and water drained from all equipment as required by s.30.07, Wis. Stats., and ss. NR 19.055 and 40.07, Wis. Adm. Code.
 - Operator shall comply with the most recent Department-approved 'Boat, Gear, and Equipment Decontamination and Disinfection Protocol', Manual Code #9183.1, available at <http://dnr.wi.gov/topic/invasives/disinfection.html>

All portions of this permit, map and accompanying cover letter must be in possession of the chemical applicator at the time of treatment. During treatment all provisions of Chapter NR 107.07 and NR 107.08, Wis. Adm. Code, must be complied with, as well as the specific conditions contained in the permit cover letter.

I hereby certify that the above information is true and correct and that copies of the application shall be provided to all affected property owners promptly and that the conditions of the permit will be adhered to. All portions of this permit, map and accompanying cover letter must be in possession of the applicant or their agent at time of plant removal. During plant removal activities, all provisions of applicable Wisconsin Administrative Rules must be complied with, as well as the specific conditions contained in the permit cover letter.

Steps to Complete the signature process

IMPORTANT: All email correspondence will be sent to the address associated with your WAMS ID).

1. Read and Accept the Responsibilities and Certification
2. Press the Initiate Signature Process button
3. Open the confirmation email for a one time confirmation code and instructions to complete the signature process.

You will receive a final acknowledgement email upon completing these steps.

☐ Check if you are signing as Agent for Applicant.
☒ I hereby certify that the above information is true and correct and that copies of this submittal have been provided to the appropriate parties named in the contact section and that the conditions of the permit and pesticide use will be adhered to.

Initiate Signature Process

Review Applicant Responsibilities and Certification items 1 – 5 before starting the signature process. You are agreeing with these statements or signifying you will/have completed them. You may request that APM staff not supervise the treatment. The determination will be in your permit cover letter.

If there were any property owners adjacent to your treatment area, signing your permit indicates you have provided a copy of this permit to them. You can mail via postal service, email, or hand-deliver a copy. You can also mail a post-card containing a link to a live website where a copy of the permit application can be read in full.

The signature process has two steps. Please read the instructions carefully.

[OPTIONAL] Check the first box ONLY if you are “agent for applicant,” and see the [Assign Role Feature](#) section if you require a two-person signature process.

Check the “**I hereby certify...**” box and click **Initiate Signature Process**. Follow prompts and you will receive an email. You will need to click the link there to **finalize** the signature process.

Mechanical/Manual Permit Application (3200-113) – New Application

Navigate to the [ePermitting site](#) and select the Aquatic Plant Management permit category on the left side. The following screen will appear:

Aquatic Plant Management

NOTE: Missing or incomplete fields are highlighted at the bottom of each page. You may save, close and return to your draft permit as often as necessary to complete your application. If there are no updates in 90 days, your draft is deleted

PLEASE NOTE: You must complete the section below before continuing.

Site or Project Name:

The permit application will be saved automatically with this name

Activity

Before completing your APM permit application, the DNR encourages applicants to contact their local APM Contact:
http://dnr.wi.gov/lakes/contacts/Contacts.aspx?role=AP_MNGT

Home Tab

Site or Project Name:

Enter name of the waterbody/wetland site to be treated.

Activity:

Select *Mechanical Control Application*. The permit is now saved under your drafts.

Enter previous years permit information below to import Contact Information for new application (Optional) or pay Renewal Fee

Permit ID #:

Please Select One:

☒ New application
☐ Pay Renewal Fee

[How to locate last years permit](#)

Enter previous years information (Optional)

To autofill the administrative information from a previous permit, enter previous permit number and double click **Import Permit**. When the two fields turn **GREEN**, the import was successful.

Important Note: This is case sensitive (use capital letters) and may be sensitive to extra spaces/characters before or after the number.

See [Troubleshooting Permit Import](#) if you have issues.


The selection radio button will default to New application.


Click **Contacts** Tab at the top to proceed.

Contacts Tab

Contact Information

NOTE: If you used the permit import feature, please check to ensure the information autopopulated accurately and correct any errors you find.

 Save

Do not close your work until you **SAVE**.  Close

Home	Contacts	Site	Application	Attachments	Payment	Signature
------	----------	------	-------------	-------------	---------	-----------

Contact Information

Applicant Information

Organization	<input type="text"/>
Last Name:	<input type="text"/> *
First Name:	<input type="text"/> *
Mailing Address:	<input type="text"/> *
City:	<input type="text"/> *
State:	Wisconsin ▼
Zip Code:	<input type="text"/> *
Email:	<input type="text"/> *
Phone Number: (xxx-xxx-xxxx)	<input type="text"/> *
Alternative Phone Number: (xxx-xxx-xxxx)	<input type="text"/>

Applicant Information

Fill out contact information for the landowner/sponsoring organization/sponsor as accurately as possible. This section should not contain any removal firm company/employee information. The application will not be considered complete unless a phone and/or email address for the applicant is provided. Applicant email and phone number data are stored in our internal staff database only, so they will appear blank on the final PDF that is visible to the public.

Fields marked with red * are required.

Waterbody Address	
Last Name:	<input type="text"/>
First Name:	<input type="text"/>
Street Address:	<input type="text"/> *
City:	<input type="text"/> *
State:	Wisconsin ▼
Zip Code:	<input type="text"/> *
Email:	<input type="text"/>
Phone Number:	<input type="text"/>
(xxx-xxx-xxxx)	
Alternative Phone Number:	<input type="text"/>
(xxx-xxx-xxxx)	

Waterbody Address

Enter waterbody contact information. Enter the most accurate address you can find for the site. If you cannot find a specific street address, enter the nearest road name/intersection or fire number. The other fields should be filled in if they differ from the applicant contact information above.

Removal Firm Information (if sub contracted)	
Name of Firm:	<input type="text"/>
Address:	<input type="text"/>
City:	<input type="text"/>
State:	Wisconsin ▼
Zip:	<input type="text"/>
Email:	<input type="text"/>
Phone Number:	<input type="text"/>
(xxx-xxx-xxxx)	

Removal Firm Information

Enter contact information for the organization/person who will be conducting the control work.

Adjacent Riparian Property Owners

NOTE: Phone and email address will not be publicly viewable.

☐ Uploaded riparian owners to attachment tab
 ☐ Riparian Owners Information is not applicable for this application

Name	Address	Phone	Email Address
John Smith	123 Example Road	123-456-7891	example@example.com

Adjacent Riparian Property Owners

Enter contact information for any riparian property owners within 150' of the site. Name(s) and address(es) are required. Phone and email will be stored in our internal database only and hidden on the final PDF that is visible to the public.

Check the **Uploaded riparian owners to attachment tab** box and upload a list of names and addresses as a separate file in a later tab OR fill in blanks in this section. Use the **Add Contact** button to add more fields as needed and use the red **X** button to delete rows.

If there are no riparian property owners within 150' of the control site, you may check the box **Riparian Owners information is not applicable for this application**.

Click **Press to Refresh Missing Fields** to ensure you completed the requirements.

Click **Continue to Next Tab**

Site Tab

NOTE: If you used the permit import feature, please check to ensure the information autopopulated accurately and correct any errors you find.

Site Information - Has Missing Items	
Waterbody Containing Control Area(s)	
Waterbody Property Owners Association or Waterbody District Representative:	<input type="text"/> <input type="checkbox"/> None
Water Body Name:	<input type="text"/>
Primary County:	<input type="text"/>
Latitude:	<input type="text"/>
Longitude:	<input type="text"/>
Section:	<input type="text"/>
Township:	<input type="text"/>
Range:	<input type="text"/>
Direction:	<input type="radio"/> E <input type="radio"/> W
Waterbody Surface Area:	<input type="text"/> acres
Estimated Surface area that is 10ft or less	<input type="text"/> acres

Waterbody Containing Control Area(s)

Waterbody Property Owners' Association or Waterbody District Representative: Enter name or check the **None** box.

Waterbody Name and Primary County:

Enter the most accurate name and primary county corresponding to the site. If not a specific waterbody, you may enter property name, wildlife area name, etc.

Latitude/Longitude:

Select a point near the center of your project that best represents the lat/long. Ensure enough digits are used for lat/long to specifically locate the site and **please use Decimal Degrees**. See [Help](#) section for assistance.

Township-Range-Section (TRS):


Select the TRS parcel that best represents the site, such as the one closest to the center. Use 2-digit numbers (01, 02, etc.) for TRS and make sure either E (east) or W (west) is selected. See [Help](#) section for assistance.

Waterbody Surface Area:

Supply the total area of contiguous lake, pond, etc. within which you are proposing to control plants. If in doubt about what can be included in a single permit, check with your APM coordinator.

Estimated Surface Area that is 10 Feet or Less in Depth:

Enter best estimate.

Proposed Control Area(s)									
Length of project area	1,0...	ft. x Shoreline or area width	500	ft. /43,560=	11.478	Estimated Acreage	Avg. Depth	5	ft.
Length of project area	150	ft. x Shoreline or area width	500	ft. /43,560=	1.722	Estimated Acreage	Avg. Depth	5	ft. 
<input type="checkbox"/> Insert item									
TOTAL ESTIMATED ACREAGE 13.2001836547292									

Proposed Control Area(s)

Area(s) Proposed for Control:

Determine the acreage of the waterbody in which you wish to control plants. If planning to control plants in polygons/lanes within a larger waterbody, make a best effort to enter **length**, **width**, and **depth** for each area and the form will calculate the acreage and provide a grand total. Use the **Insert Item** button to add more rows and use the red **X** to delete rows.

Sites such as Google Earth, WISFIRS, or the surface water data viewer ([SWDV](#)) have area measurement tools that can help you to delineate the areas within which you want to control plants. Sometimes this may include getting a best estimate of scattered control areas within a larger waterbody area.

In cases where entering the dimensions for each polygon is not feasible, enter an **estimated acreage** and leave the length and width fields blank.

In cases where entering the dimensions for each polygon is not feasible, enter an **estimated acreage** and leave the length and width fields blank.

Click **Press to Refresh Missing Fields** to ensure you completed the requirements.

Click **Continue to Next Tab**

Application Tab

Most questions are self-explanatory and are required fields. Please ensure answers are as accurate as possible.

Notice: Pursuant to s. 23.24, Wis. Stats., the information requested on this form is required by the Department of Natural Resources (DNR) to permit aquatic plant control mechanical and/or manual application. Failure to complete and submit this form will result in no permit being issued. Personally identifiable information collected will be used for program administration and may be made available to requesters to the extent required under Wisconsin's Open Records law [ss. 19.31 - 19.39, Wis. Stats.].

Section II: Location of Aquatic Plant Removal

Has a Lake Management plan been provided to the DNR?
☒ Yes ☐ No ☐ Don't Know

If Yes, date approved of most current copy
[]

Link to Approved Plan: []
☐ Uploaded Plan copy as an Attachment

Does the proposed plant removal agree with the approved plan? ☐ Yes ☐ No

If NO, explain. Attach additional sheets if necessary: []

Is this area within or adjacent to a Sensitive Area designated by the Wisconsin Department of Natural Resources?
☐ Yes ☐ No ☐ Don't Know If yes, list sites: []

Name of 1st Plant Disposal Site	1/4 1/4 ... ▼	1/4 ... ▼	Section A	Township N	Range A	<input checked="" type="radio"/> E <input checked="" type="radio"/> W	County *! ▼
Name of 2nd Plant Disposal Site (if applicable)	1/4 1/4 ... ▼	1/4 ... ▼	Section	Township N	Range	<input type="radio"/> E <input type="radio"/> W	County ▼

What type of aquatic plants below the Ordinary High Water Mark are proposed to be removed? (check all that apply)
☒ Emergent (above water level) ☐ Submergent (below water level) ☐ Floating Leaf (at the surface i.e. lily pads)

Section II: Location of Aquatic Plant Removal

Fill out fields as accurately and completely as possible. You will need to answer questions about Lake Management Plans, which includes providing either a link or a copy uploaded to the Attachment section, if applicable. For “attach additional sheets if necessary”, files can be uploaded in addition to a map in the **Attachments** tab.

Section IV: Methods

What mechanical or manual methods to remove plants are proposed? (check all that apply)

☐ Mechanical harvesting ☐ Raking ☐ Other (specify) _____

☐ Hand Pulling ☐ Cutting ☐ Alum

If alum is proposed, has a plan been developed? ☐ Yes ☐ No If yes, please include the plan with this application.

Please explain why you selected the proposed cutting method(s).
[]

Section IV: Methods

Fill out fields as accurately and completely as possible.

*Alum is no longer permitted through aquatic plant management, do not use this form to apply for a permit. Alum is permitted via the Low-Impact Discharge (WI-0066575-01-0) permit in Wastewater program. For more information, please go here: [Wastewater General Permits](#) | [Wisconsin DNR](#)

Section VI: Reasons for Aquatic Plant Removal	
Purpose of Aquatic Plant Removal:	Nuisance Caused By:
<input type="checkbox"/> Maintain navigational channel for common use	<input type="checkbox"/> Emergent water plants
<input type="checkbox"/> Maintain private boat access	<input type="checkbox"/> Submergent water plants
<input type="checkbox"/> Maintain private access for fishing	<input type="checkbox"/> Floating water plants
<input type="checkbox"/> Improve Swimming	<input type="checkbox"/> Other _____
<input type="checkbox"/> Other _____	
Name of plants, if known: _____	

Section VI: Reasons for Aquatic Plant Control

Fill out fields as accurately and completely as possible. Be sure to name any plant species you can identify.

Section VII: Integrated Pest Management (Alternatives Considered)		
	A. Previously Done?	B. Presently Proposed?
1. Chemical	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
2. Dredging	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
3. Drawdown	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
4. Nutrient controls in watershed	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
5. Nutrient controls on property	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
6. Other	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No
Note: Consider feasibility of alternatives for each control site. This information not only helps the department make a decision on this application but also helps you evaluate your investment in aquatic plant management.		
Describe the level of success for alternative methods previously used:		
1. Chemical	_____	
2. Dredging	_____	
3. Drawdown	_____	
4. Nutrient controls in watershed	_____	
5. Nutrient controls on property	_____	
6. Other	_____	

Section VII: Integrated Pest Management (Alternatives Considered)

Fill out fields as accurately and completely as possible. Remember that it is important to consider the feasibility of alternative for each control site. It helps the department decide on the application and helps you evaluate your investment in aquatic plant management.

Fill out the appropriate responses and click **Press to Refresh Missing Fields** to ensure you completed the requirements. Click **Attachments**.

Attachments Tab

Required Attachments and Supplemental Information

Contacts :

Completion Status: Has Missing Items

Site:

Completion Status: Has Missing Items

Mechanical - Manual Plant Control Application :

Completion Status: Complete

Check that Contacts, Site, and Mechanical-Manual Plant Control Application are marked *Complete* on this tab. If marked *Has Missing Items* as shown here, go back to the tab and enter the required fields.

Upload Required Attachments

Upload Required Attachments (15 MB per file limit) - [Help reduce file size and trouble shoot file uploads](#)

*indicates completion of this item is required

Note: To add additional attachments using the down arrow icon. To replace an existing file, use the 'Click here to attach file' link. To remove additional items, select the item and press CTRL Delete.

Riparian Owners

☒

Site Map

☒

☒ Add another map

Lake Management Plan

☒

☒ Add treatment plan

Riparian Owners:

If you checked the box from the Contacts Tab, you must upload a file containing the owners list, which should include names and addresses of everyone living with 150' of the site.

Site Map:

Outline the proposed treatment area and ensure that the map includes some landmarks such as roads and access points. Indicate the direction of surface water flow out of the unit if applicable. If there is a river or creek, draw an arrow and label it as "flow". Use the tools used for calculating acreage to generate a map (e.g., <https://dnrmapping.wi.gov/H5/?Viewer=SWDV>).


Use the **Add another map** or **Add treatment plan** button to add any other documents you need to submit with the application. Sometimes it may be useful to include a cover letter or additional supporting documents depending on the treatment you are proposing. See [Site Map Examples](#) for help.

Lake Management Plan:


If you checked the box associated with this question from the *Application Tab*, you are required to upload a file containing the lake management plan.

Click the **Payment** tab at the top of the page.

Payment Tab

 Save

Do not close your work until you **SAVE**.

 Close

HomeContactsSiteApplicationAttachmentsPaymentSignature

Fee Calculation

Mechanical Removal

Fees are not refundable and are calculated as follows:

- Single riparian area, one property owner, less than one acre**\$30.00**
- Multiple riparian areas, offshore control areas, multiple riparian properties, one acre or greater \$30/acre (round up to nearest whole acre) If proposed removal acre is greater than 10 acres fee caps at \$300

Acreage:15.00

Acreage Fee:\$300

Total Fee:\$300

Pay OnlineReturn to Permit

[Fee Exempt?](#)

You can not continue to the signature page until you pay for your application.

The fee is calculated from the acreage information entered on the Site tab. Click **Pay Online** to begin the payment process and follow the instructions. Then click the **Signature** tab.

Signature Tab

Applicant Responsibilities and Certification

1. The applicant has prepared a detailed map, which shows the length, width and average depth of each area proposed for the control of rooted vegetation.
2. The applicant understands that the Department of Natural Resources may require supervision of any aquatic plant management project involving removal. Supervision may include inspection of the proposed treatment area and/or equipment, before, during, or after removal. The applicant is required to notify the regional office 4 working days in advance of each anticipated date of plant removal with the date, time, location and size of plant removal unless the Department waives this requirement. The advance notification may be specified in your permit.
3. The applicant agrees to inform all operators of harvesting equipment of the conditions and terms of this permit and to insure that all operators understand and abide by those terms and conditions.
4. The applicant agrees to comply with all terms and conditions of this permit, if used, as well as applicable Wisconsin Administrative Rules. The required fee is attached.
5. Conditions related to invasive species movement. The applicant and operator agree to the following methods required under s. NR 109.05(2), Wis. Adm. Code for controlling, transporting and disposing of aquatic plants and animals, and moving water:
 - Aquatic plants and animals shall be removed and water drained from all equipment as required by s. 30.07, Wis. Stats., and ss. NR 19.055 and 40.07, Wis. Adm. Code.
 - Operator shall comply with the most recent Department-approved 'Boat, Gear, and Equipment Decontamination and Disinfection Protocol', Manual Code # 9183.1, available at <http://dnr.wi.gov/topic/invasives/disinfection.html>

I hereby certify that the above information is true and correct and that copies of the application have been provided to the appropriate parties name in Section II and that the conditions of the permit will be adhered to. All portions of this permit, map and accompanying cover letter must be in possession of the applicant or their agent at time of plant removal. During plant removal activities, all provisions of applicable Wisconsin Administrative Rules must be complied with, as well as the specific conditions contained in the permit cover letter

Review Applicant Responsibilities and Certification items 1 – 5 before starting the signature process. You are agreeing with these statements or signifying you have/will complete them.

The signature process has two steps. Please read the instructions carefully.

[OPTIONAL] Check the first box ONLY if you are “agent for applicant,” and see the [Assign Role Feature](#) section if you require a two-person signature process.

Check the “***I hereby certify...***” box and click ***Initiate Signature Process***. Follow prompts and you will receive an email. You will need to click the link there to **finalize** the signature process.

Mechanical/Manual Permit Application (3200-113) – Pay Renewal Fee

Please note - – Under NR 109.05(5), the renewal feature shall only be used in the following situations:

- You are paying the annual renewal fee as part of your request for renewal of a previous permit. This may be done annually for up to a total of 3 years in succession provided no modifications or changes are made from the original permit.
- You are paying the annual renewal fee for a multi-year NR109 permit already issued.

If neither applies, please see the [Mechanical/Manual Permit Application \(3200-113\) – New Application](#) section.

If you aren't sure what applies to you, please contact your [regional APM Coordinator](#) by the waterbody's county.

If proceeding with renewal, navigate to the [ePermitting site](#) and select the Aquatic Plant Management permit category on the left side. The following screen will appear:

Aquatic Plant Management

NOTE: Missing or incomplete fields are highlighted at the bottom of each page. You may save, close and return to your draft permit as often as necessary to complete your application. If there are no updates in 90 days, your draft is deleted

PLEASE NOTE: You must complete the section below before continuing.

Site or Project Name:

The permit application will be saved automatically with this name

Activity

Select Activity.....

Before completing your APM permit application, the DNR encourages applicants to contact their local APM Contact:
http://dnr.wi.gov/lakes/contacts/Contacts.aspx?role=AP_MNGT

Site or Project Name: Enter name of your current NR109 permit.

Activity: Select *Mechanical Control Application*.

Enter previous years information to pay Renewal Fee

Select the **Pay Renewal Fee** radio button.

In the **Permit ID #** box, enter the permit number of the NR109 permit you are paying the renewal fee for and

click **Double Click to Import Permit**. When the field turns **GREEN**, the import was successful. You will see Permit Name, Waterbody Name, Permit Holder Name, and Renewal Fee. Please verify this is the correct information for the permit you are renewing. The screenshot to the above right shows an example of what it will look like.

Enter previous years permit information below to import C

Permit ID #:

NO-2022-12-123245

Please Select One:

☐ New application
☒ Pay Renewal Fee

Permit Name:

Example Permit

Waterbody Name:

Example Lake

Permit Holder Name:

Jane Smith

Renewal Fee:

\$30

If the information is correct, click **Pay for renewal** at the bottom of the page. It will take you to US Bank where you can follow the instructions and complete payment, then return to the ePermitting system to sign and submit the renewal.

The signature process has two steps. Please read the on-screen instructions carefully. Follow prompts and you will receive an email. You will need to click the link there to **finalize** the signature process.

Important Note: Permit number is case sensitive (use capital letters) and may be sensitive to extra spaces/characters before or after the number. See [Troubleshooting Permit Import](#) if you have issue.

Chemical Treatment Record (3200-111)

Navigate to the [ePermitting site](#) and select the Aquatic Plant Management permit category on the left side. The following screen will appear:

Aquatic Plant Management

NOTE: Missing or incomplete fields are highlighted at the bottom of each page. You may save, close and return to your draft permit as often as necessary to complete your application. If there are no updates in 90 days, your draft is deleted

PLEASE NOTE: You must complete the section below before continuing.

Site or Project Name:

The permit application will be saved automatically with this name

Activity

Before completing your APM permit application, the DNR encourages applicants to contact their local APM Contact:
http://dnr.wi.gov/lakes/contacts/Contacts.aspx?role=AP_MNGT

Home Tab

Site or Project Name:

Enter name of the waterbody/wetland site that you treated.

Activity:

Select *Chemical Treatment Record*.

The treatment record is now saved under your drafts and the following screen will appear:

Aquatic Plant Management

NOTE: Missing or incomplete fields are highlighted at the bottom of each page. You may save, close and return to your draft permit as often as necessary to complete your application. If there are no updates in 90 days, your draft is deleted

[Home](#)[Treatment](#)[Attachments](#)[Signature](#)

PLEASE NOTE: You must complete the section below before continuing.

Site or Project Name:	<input type="text" value="Example Treatment Record"/>
The permit application will be saved automatically with this name	
Activity	<input type="text" value="Chemical Treatment Record"/>

Lookup Treatment Record Information

Permit ID #:

[Where to find your permit number](#)

Double Click to Validate Permit Number

Lookup Treatment Record information

Enter the permit number for the treatment record you are submitting and click **Double Click to Validate Permit Number**.

Important Note: This is case sensitive (use capital letters) and may be sensitive to extra spaces/characters before or after the number. Please make sure the number is entered exactly as shown on your permit.

Lookup Treatment Record Information

Permit ID #:

Permit Name: **Example Permit**

Waterbody Name: **Example Lake**

Permit Holder Name: **Jane Smith**

Chemical Treatment Completed: ☐ Yes ☐ No

After your permit number validates successfully, the box will turn green and you will see Permit Name, Waterbody Name, and Permit Holder Name information below it. Please verify you are submitting the treatment record under the correct permit.

If you completed treatment for the permit – Select **Yes** for Chemical Treatment Completed. Click **Treatment** Tab to proceed.

If you did not complete treatment for the permit – Select **No** for Chemical Treatment Completed. Click **Submit “no treatment” treatment record**. This will take you directly to the Signature Tab to sign and submit.

Treatment Tab

State of Wisconsin Department of Natural Resources dnr.wi.gov		Aquatic Plant Management Herbicide Treatment Record Form 3200-111 (R 11/16) Page 1 of 2	
Notice: Completion of this form is a condition of the permit and provides records required by WDNR (NR 107) and DATCP (ATCP 29.21 and 29.22). The Department may not issue you future permits unless you complete and submit this form. Personal information collected will be used for administrative purposes and may be provided to requesters to the extent required by Wisconsin's Open Records Law [ss. 19.31-19.39, Wis. Stats.].			
Submit this form: (1) immediately if any unusual circumstances occurred during treatment (2) as soon after treatment as possible, no later than 30 days (3) by October 1 if no treatment occurred			
Completion of this form along with the permit satisfies the requirements of WDNR (NR 107) and DATCP (ATCP 29.21 and 29.22).			
General Permit Information			
Permit Number NE-2018-05-0079	Water body Name (including ponds, e.g., Smith Pond)		
County *	Permit Holder Name (Customer Name) *		
Permit Holder Address *	City *	State *	Zip Code *

General Permit Information

Fill out fields as accurately and completely as possible. Many fields will autopopulate, but please check them over for correctness.

Treatment Information					
Treatment Date(mm/dd/yyyy) 12/20/2022	Starting Time (24:00 hour) *	Ending Time (24:00 hour) *	Water Temp *	<input type="checkbox"/> C <input type="checkbox"/> F	Ambient Air Temp *
Wind Speed (mph) *	Wind Direction Select *	Expected Duration of Chemical Residuals *			
Adverse Conditions Noted (i.e., dead fish, spawning fish, algae bloom, etc.)					
If adverse conditions noted, indicate corrective actions taken					
Comments					
Onsite Supervision by DATCP and/or DNR Staff <input type="radio"/> Yes <input type="radio"/> No		If Yes, Supervisor Name : 			
Mixing and Loading Site Location (if other than business site or from prepackaged retail container or applied with equipment with a total capacity of not more than 5 gallons liquid or 50 pounds dry)					
Water User Restriction					
<input type="checkbox"/> No Restrictions <input type="checkbox"/> Consuming Fish <input type="checkbox"/> Pet/Livestock Water <input type="checkbox"/> Irrigation (Crop)					
<input type="checkbox"/> Swimming <input type="checkbox"/> Drinking Water <input type="checkbox"/> Irrigation Other: *					
<input type="checkbox"/> Herbicide Treatment and Water Use Restrictions Signs Posted in Accordance With NR 107 and ATCP 29.22?					
Applicator shall provide each customer with a free copy of each pesticide label used (if requested)					

Treatment Information

Fill out fields as accurately and completely as possible. For Treatment Date, please only enter one date. If you treated on a second date, please submit that as a separate treatment record. Note that Treatment Date will default to the current date – please change as needed.

Applicator Information				
Individual or Business Name Aquatic Biologists, Inc.			Telephone xxx-xxx-xxxx 920-921-6827 x	
Street Address N4828 U.S. Highway 45 South				
City Fond du Lac			State WI ▼	ZIP Code 54937
Individuals Making or Supervising Pesticide Application	Last Name	First	Certification #	License #
<input type="checkbox"/> Add Individual				
Name of Person Completing Form				

Applicator Information

Fill out fields as accurately and completely as possible. All fields are required. Check that business information autopopulated correctly. Use the **Add Individual** button to add names, certification numbers, and license numbers for everyone who was part of the treatment.

Aquatic Plant Management Herbicide Treatment Record							
Form 3200-111 (R4/20)				Page 2 of 2			
Date: 7/5/2022							
Site No	Property Name	Address / Fire No	Treated acreage	Permitted Acreage	Sensitive Area?	Latitude	Longitude
			0.00	0.00	<input type="checkbox"/>		
Herbicide Name	Other Herbicide	EPA Reg. No.	Amount Applied	Units	Application Concentration Rate (mg/l = ppm)		
				Select.. ▼			
<input type="checkbox"/> Add Herbicide							
<input type="checkbox"/> Add Site							

Control Site(s) and Chemical Information


Fill out fields as accurately and completely as possible. Include an accurate lat/long for each site treated using decimal degrees. Use the **Insert Herbicide** and **Insert Site** buttons to add additional information.

If selecting from the *Herbicide* Name dropdown, the EPA Reg No. will autofill for you. Use the *Other* box to add chemicals not listed in the dropdown menu and manually enter the associated EPA Reg No. You can find the number by searching for the Product Name here: <http://www.kellysolutions.com/WI/searchbyproductname.asp>.

TS	SP	Site(s)	TS	SP	Site(s)	TS	SP	Site(s)
<input type="checkbox"/>	<input type="checkbox"/> Cattail	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/> Flat-Stem Pondweed	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/> Richardson Pondweed	<input type="text"/>
<input type="checkbox"/>	<input type="checkbox"/> Chara	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/> Floating-Leaf Pondweed	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/> Robbins Pondweed	<input type="text"/>
<input type="checkbox"/>	<input type="checkbox"/> Coontail	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/> Illinois Pondweed	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/> Sago Pondweed	<input type="text"/>
<input type="checkbox"/>	<input type="checkbox"/> Curly-Leaf Pondweed	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/> Large-Leaf Pondweed	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/> Watershield	<input type="text"/>
<input type="checkbox"/>	<input type="checkbox"/> Duckweed	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/> Northern Milfoil	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/> White Water Lily	<input type="text"/>
<input type="checkbox"/>	<input type="checkbox"/> Elodea	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/> Phragmites	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/> Wild Celery	<input type="text"/>
<input type="checkbox"/>	<input type="checkbox"/> Eurasian /hybrid Milfoil	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/> Planktonic Algae	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/> White-Stem Pondweed	<input type="text"/>
<input type="checkbox"/>	<input type="checkbox"/> Filamentous Algae	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/> Purple Loosestrife	<input type="text"/>			

Other Plants (not listed above)

TP	SP	Name	Site(s)
<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>

 Insert item

Aquatics at Treatment Site

Indicate the plant species found during treatment using the check boxes and the Other box as needed. For records with more than one treatment site, indicate at which site(s) each species was found. If you need to enter more than one site, please separate them with commas.

Use the blank box on the lower right to add additional species not included on the list. If you need to enter more than one, please separate them with commas.

Click ***Press to Refresh Missing Fields*** to ensure you completed the requirements.

(OPTIONAL) If you need to submit a treatment map or any other attachments, click ***Attachments*** tab.

To sign and submit, click ***Signature*** tab.

Attachments Tab (OPTIONAL for Some Treatment Records)


Required Attachments and Supplemental Information


Chemical Treatment Record : Edit Form

Completion Status: Complete


Upload Required Attachments (15 MB per file limit) -
[Help reduce file size and trouble shoot file uploads](#)
**indicates completion of this item is required*
Note: To add additional attachments using the down arrow icon. To replace an existing file, use the 'Click here to attach file' link. To remove additional items, select the item and press CNTRL Delete.


Site Map

 Click here to attach a file

 Add another map

Treatment Plan

 Click here to attach a file

 Add treatment plan

Check that *Chemical Treatment Record* completion status says "Complete".

Upload Site Map and/or Treatment Plan if necessary.

Click the **Signature Tab** to proceed.

Signature Tab

Sign and Submit

Applicant Responsibilities and Certification
I certify that I have completed the Chemical Treatment Record as required by WDNR (NR107) and DATCP (ATCP 29.21 and 29.22).

Steps to Complete the signature process

IMPORTANT: All email correspondence will be sent to the address associated with your WAMS ID).

1. Read and Accept the Responsibilities and Certification
2. Press the Initiate Signature Process button
3. Open the confirmation email for a one time confirmation code and instructions to complete the signature process.

You will receive a final acknowledgement email upon completing these steps.

☐ Check if you are signing as Agent for Applicant.

☐ I hereby certify that the above information is true and correct and that copies of this submittal have been provided to the appropriate parties named in the contact section and that the conditions of the permit and pesticide use will be adhered to.

Initiate Signature Process

The signature process has two steps. Please read the instructions carefully.

[OPTIONAL] Check the first box ONLY if you are “agent for applicant,” and see the [Assign Role Feature](#) section if you require a two-person signature process.

Check the “***I hereby certify...***” box and click ***Initiate Signature Process***. Follow prompts and you will receive an email. You will need to click the link there to **finalize** the signature process.

Mechanical/Manual Reporting Form (3200-011)

Navigate to the [ePermitting site](#) and select the Aquatic Plant Management permit category on the left side. The following screen will appear:

Aquatic Plant Management

NOTE: Missing or incomplete fields are highlighted at the bottom of each page. You may save, close and return to your draft permit as often as necessary to complete your application. If there are no updates in 90 days, your draft is deleted

PLEASE NOTE: You must complete the section below before continuing.

Site or Project Name:

The permit application will be saved automatically with this name

Activity

Before completing your APM permit application, the DNR encourages applicants to contact their local APM Contact:
http://dnr.wi.gov/lakes/contacts/Contacts.aspx?role=AP_MNGT

Home Tab

Site or Project Name:

Enter name of the waterbody/wetland site that you treated.

Activity:

Select *Mechanical/Manual Control Reporting Form*.

The control report is now saved under your drafts and the following screen will appear:

Aquatic Plant Management

NOTE: Missing or incomplete fields are highlighted at the bottom of each page. You may save, close and return to your draft permit as often as necessary to complete your application. If there are no updates in 90 days, your draft is deleted

PLEASE NOTE: You must complete the section below before continuing.

Site or Project Name: Example Mechanical Control Report

The permit application will be saved automatically with this name

Activity: Mechanical/Manual Control Reporting Form

Before completing your APM permit application, the DNR encourages applicants to contact their local APM Contact:
https://apps.dnr.wi.gov/lakes/contacts/contacts.aspx?role=AP_MNGT

Enter permit number to begin your treatment record or control report

Permit ID #: NE-2023-12-3456M

[Where to find your permit number](#)

Double Click to Validate Permit Number

Lookup Treatment Record information

Enter the permit number for the treatment record you are submitting and click **Double Click to Validate Permit Number**.

Important Note: This is case sensitive (use capital letters) and may be sensitive to extra spaces/characters before or after the number. Please make sure the number is entered exactly as shown on your permit.

Enter permit number to begin your treatment record or control report

Permit ID #: NE-2023-12-3456M

Permit Name: Example Permit

Waterbody Name: Example Lake

Permit Holder Name: Jane Smith

Treatment or Control Completed: ☐ Yes ☐ No

[Where to find your permit number](#)

After your permit number validates successfully, the box will turn green and you will see Permit Name, Waterbody Name, and Permit Holder Name information below it. Please verify you are submitting the control report under the correct permit.

If you completed plant removal/control for the permit – Select **Yes** for *Chemical Treatment or Control Completed*. Click **Treatment** Tab to proceed.

If you **did not** complete plant removal/control for the permit – Select **No** for *Chemical or Control Treatment Completed*. Click **Submit “no treatment” treatment record**. This will take you directly to the Signature Tab to sign and submit.

Control Information Tab

State of Wisconsin
Department of Natural Resources
dnr.wi.gov

Aquatic Plant Management Mechanical / Manual Control Report

Form 3200-011 (R4/23)

Notice: Completion of this form is a condition of your permit under NR 109.05(2)(g). Personal information collected will be used for administrative purposes and may be provided to requesters to the extent required by Wisconsin's Open Records Law [ss. 19.31-19.39, Wis. Stats.].

Submit this form: (1) immediately, if any unusual circumstances occurred during control or by department request
(2) within 30 days of the last control activity in the calendar year
(3) by December 31 if no control occurred

Permit Number	Water body Name (including ponds, e.g., Smith Pond)		
County	Permit Holder Name (Customer Name)		
Permit Holder Address	City	State	Zip Code

General Permit Information

Fill out fields as accurately and completely as possible. Many fields will autopopulate, but please check them over for correctness.

Control Information			
Start Date(mm/dd/yyyy)	End Date(mm/dd/yyyy)	Estimated Days of Conducting Control	Control Method/Equipment Used
12/14/2023			Select...
Comments			
Onsite Supervision by DATCP and/or DNR Staff		If Yes, Supervisor Name :	
<input type="checkbox"/> Yes <input type="checkbox"/> No			

Control Information

Fill out fields as accurately and completely as possible. Note that Start Date will default to the current date – please change as needed. You can use the “Other” field if the dropdown choices don’t apply to you in the *Control Method/Equipment Used* field.

Controller/Operator Information			
Individual or Business Name *		Telephone xxx -xxx-xxxx * X	
Street Address *			
City *	State WI ▼	ZIP Code *	
Name of Person Completing Form *			
Individual(s) Operating Control Equipment	Last Name *		First *
<input type="button" value="Add Individual"/>			

Controller/Operator Information

Fill out fields as accurately and completely as possible. All fields are required. Check that business information autopopulated correctly. Use the **Add Individual** button to add names for everyone who operated control equipment.

Disposal Site Information	
Disposal Site Name *	Disposal Site Address *
<input type="button" value="Insert Site"/>	

Disposal Site Information

Enter the Site Name and full address for your plant disposal site. Use the **Insert Site** button to add names if more than one site was used.

Site Summary							
Site No	Property Name	Address / Fire No	Controlled Acreage	Permitted Acreage	Sensitive Area?	Latitude	Longitude
*			0.00	0.00	<input type="checkbox"/>	*	*
Hours Spent	Total Amount of Plants or Organisms Removed /Controlled		Units	Comments			
*	*		Select...*				
Species Details – Include both target & non-target species information							
Species Name			Other Species	Amount Removed	Units		
* ▼				*	Select* ▼		
<input type="button" value="Insert Species"/>							
<input type="button" value="Insert Site"/>							

Site Summary and Species Details

Fill out fields as accurately and completely as possible. Include an accurate lat/long for each site treated using decimal degrees. Use the **Insert Species** and **Insert Site** buttons to add additional information.

Use the dropdown box to select each species. If you need to enter a species not found in the choices, first select *Other* from the dropdown box. The *Other Species* box will then allow you to type the name there.

Click **Press to Refresh Missing Fields** to ensure you completed the requirements.

(OPTIONAL) If you need to submit a treatment map or any other attachments, click **Attachments** tab.

To sign and submit, click **Signature** tab.


Attachments Tab (OPTIONAL for Some Control Reports)


Required Attachments and Supplemental Information


Mechanical/Manual Control Reporting Form: Edit Form


Completion Status: Complete

Upload Required Attachments (15 MB per file limit) -
[Help reduce file size and trouble shoot file uploads](#)
**indicates completion of this item is required*
Note: To add additional attachments using the down arrow icon. To replace an existing file, use the 'Click here to attach file' link. To remove additional items, select the item and press CNTRL Delete.

Site Map  Click here to attach a file

 Add another map

Treatment Plan  Click here to attach a file

 Add treatment plan

Check that *Mechanical/Manual Control Reporting Form* completion status says “Complete”.

Upload Site Map and/or Treatment Plan if necessary.

Click the ***Signature Tab*** to proceed.

Signature Tab

Sign and Submit

Applicant Responsibilities and Certification

I certify that I have completed the Mechanical/Manual Control Record as required by my permit condition under NR109.05(2)(g).

Steps to Complete the signature process

IMPORTANT: All email correspondence will be sent to the address associated with your WAMS ID).

1. Read and Accept the Responsibilities and Certification
2. Press the Initiate Signature Process button
3. Open the confirmation email for a one time confirmation code and instructions to complete the signature process.

You will receive a final acknowledgement email upon completing these steps.

- ☐ Check if you are signing as Agent for Applicant.
- ☐ I hereby certify that the above information is true and correct and that copies of this submittal shall be provided to the appropriate parties named in the contact section and that the conditions of the permit and pesticide use will be adhered to.

Initiate Signature Process

The signature process has two steps. Please read the instructions carefully.

[OPTIONAL] Check the first box ONLY if you are “agent for applicant,” and see the [Assign Role Feature](#) section if you require a two-person signature process.

Check the “***I hereby certify...***” box and click ***Initiate Signature Process***. Follow prompts and you will receive an email. You will need to click the link there to **finalize** the signature process.

Fee Exempt and Fee-Limited Projects

Projects that are only proposing to control for Purple Loosestrife are exempt from paying an application fee according to NR 107.11(2). Projects where the DNR itself is the applicant and will be the permittee are also fee exempt. An application can be started by a non-DNR individual and the [Assign Role Feature](#) can be used to allow the DNR representative to access the draft application and complete this section along with their signature portion.

The permit fee is limited to the basic application fee of \$20 under NR107.11(1) for the following projects: the treatment is made for the control of bacteria on swimming beaches with chlorine or chlorinated lime, the treatment is intended to control algae or other aquatic nuisances that interfere with the use of the water for potable purposes, or the treatment is necessary for the protection of public health, such as the control of disease carrying organisms in sanitary sewers, storm sewers, or marshes, and is sponsored by a governmental agency.

On the Payment tab, click the blue text “Fee Exempt or Fee Limited?” highlighted in yellow to open a menu that will enable you to proceed without paying or with only paying the base application fee.

Home	Contacts	Site	Application	Attachments	Payment	Signature
Fee Calculation						
Chemical Control Application						
1. s. NR 107.11(1), Wis. Adm. Code, lists the conditions under which the permit fee is limited to the \$20 minimum charge.						
2. s. NR 107.11(4), Wis. Adm. Code, lists the uses that are exempt from permit requirements.						
3. s. NR 107.04(2), Wis. Adm. Code, provides for a refund of acreage fees if the permit is denied or if no treatment occurs.						
If Proposed treatment is over 0.25, calculate acreage fee:						
(round up to nearest whole acre, to maximum of 50 acres)						2.07
acres X \$25 per acre = \$						\$75.00
If proposed treatment is less than 0.25 acre, acreage fee is \$0						
Basic Permit Fee (non-refundable)						\$20.00
Total Fee						\$95
<div>Pay Online Return to Permit Fee Exempt or Fee Limited?</div>						
You can not continue to the signature page until you pay for your application.						

Fee Exempt or Fee Limited Information	
Fee Exemption	
<input type="checkbox"/> I certify that this project is Fee Exempt	
Select... ▼	
Fee Limited	
<input type="checkbox"/> I certify this control is limited to the base application fee under NR107.11(1).	
Select... ▼	
Contact Information	
Please enter the contact information in case additional information is required:	
Name:	<input type="text"/>
Contact Type:	Select... ▼
Phone Number (Include Area Code)	<input type="text"/>
Contact Email:	<input type="text"/>

Click “Continue as Fee Exempt or Fee Limited” and fill in the Information fields as shown above. All fields are required after selecting either Exempt or Limited. Click the Signature Tab to proceed to signing the application when finished.

Assign Role Feature (Optional)

Using the **Assign Role** feature, you also can start a permit application and then share it with someone else. This feature is commonly used by consultants to start a permit application and get the attachments added to the permit application packet and then they will send the application to the landowner/lake organization to review and then complete the payment and signature areas. Please note that if you use this feature, the permit application may not appear under the appropriate category area as described above.

If desired, you can also send the application to another person, i.e. the landowner or lake organization, so that they can review it, complete the payment portion of the application and sign & submit the application to DNR. This is done through the **Assign Role** feature on the “My Permit Applications” webpage discussed under #5 [here](#). The person you are sharing it with needs to have a WAMS ID set up already, and you need to know the email associated with it to send the application to them.

IMPORTANT NOTE: Do not use this process if you are the applicant and are trying to complete the signature confirmation process. The steps below are for a two-person signature process. Each signer must have their own WAMS ID to complete the steps.

If you are an Authorized Representative, you may create, update and review the application and then assign it to the applicant.

If you are the applicant, you may create, update and review an application and then assign it to an authorized representative for review. Upon completion of the review process the authorized representative must reassign it back to you for final submittal.

In both cases, please do not share your WAMS credentials with others. The process to assign an application is done by selecting the email address associated with a WAMS ID. This process does not delegate access to any additional document beyond the application being assigned.

To assign to an Authorized Representative or Landowner for their review or signature:

1. Select an application from "**Draft Permit Applications**" list that require a second signature.
2. In the 'Share Application' column select '**Assign Role**' link. If an email address already appears in this column, you have already shared the application. You can re-share it with other users selecting this same link.
3. Enter the email address associated with the WAMS ID for person you wish to share the permit application in the 'Signatory Email' field. **Important:** A matching email address will display the user's WAMS ID instead of their email address, this is intentional.
4. Use the drop down for the 'New Signatory Role'. If you are the applicant, choose **authorized representative**. If you are the authorized representative, choose **applicant**.
5. Read the certification text.
6. Press '**Continue**'. This action routes an email to the selected individual WAMS email account to complete the second signature process. Please contact this individual ahead of time to remind them to check 'junk email' or 'Spam' folders in case the email is bounced.

NOTE: The application is not submitted to the DNR until the signature process is complete. The application may be edited until it is signed and submitted.

Help Section

General Help Contact: Email DNRAPMProgram@wi.gov (preferred) or call 608-438-9919

Helpful Links

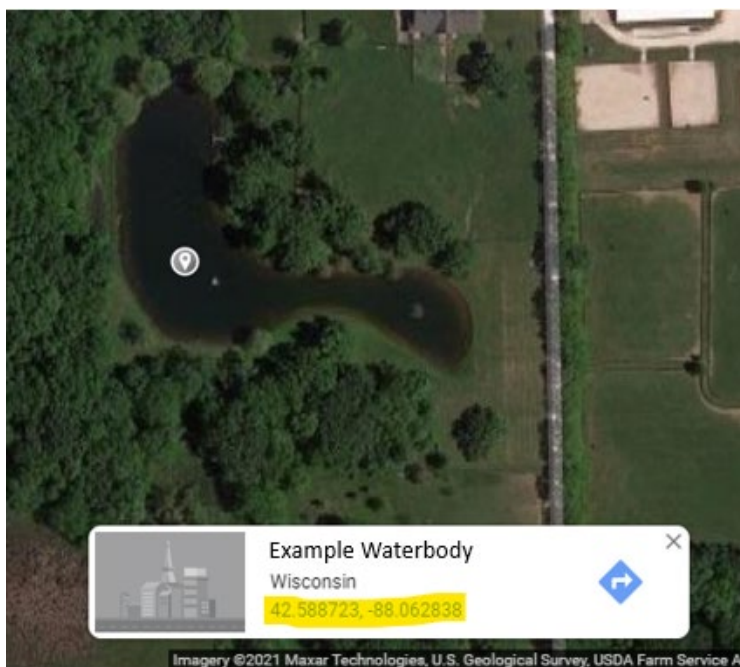
Video Guides for using the ePermitting system:

<https://permits.dnr.wi.gov/water/Pages/Video-Links.aspx>

Converting to Decimal Degrees from other coordinate formats:

<https://www.fcc.gov/media/radio/dms-decimal>

You can also locate the site using [Google Maps](#) by address or whichever coordinate system you prefer. Click and hold the mouse down over the site. A gray place marker icon should appear along with a box at the bottom containing the correct coordinate format. You can copy/paste these into the latitude and longitude section of your application. See example screenshot:



Finding Section, Township, and Range information:

<https://www.earthpoint.us/TownshipsSearchByLatLon.aspx>

Finding lake information:

<https://dnr.wi.gov/lakes/lakepages/Search.aspx?show=search>

Search by lake name using Location dropdown menu to narrow results down by county. Go to Facts & Figures Tab to find details about surface area, depth, latitude, longitude, and maps.

Determining Permit Type

Starting in 2024 a wetland permit form is available. If you are conducting control on a wetland, please select Chemical Control Application – Wetland, and go ahead as normal from there. If you are conducting tertiary wetland control along a lake or pond which is being controlled, those species may still be lumped in with the rest of the permit application.

If you have selected Chemical Control Application – Lake, River or Pond, there are three questions used to determine what type of permit is needed:

Does the waterbody have:

1. More than one property owner?
2. Uncontrolled surface water discharge?
3. Public access?

Non-Private Water (Lake, reservoir, river, stream, wetland)

If any one of the answers is “yes” it is considered a non-private waterbody.

Private Pond

If all three are “no” then the waterbody is a private pond.

However, wetlands are the exception. You may think a wetland is “private” based on the control area, but the determination of a private pond is based on the waterbody itself. Please see the wetland section below for more information.

A Note About Wetlands

In almost all instances, wetlands are not considered private ponds. The definition of private pond is a body of water completely on the land of one applicant, with no surface water discharge or a discharge that can be controlled to prevent chemical loss, with no public access (NR 107.11 (3) (a)). Wetlands are defined separately as an area where water is at, near, or above the land surface long enough to be capable of supporting aquatic or hydrophytic vegetation and which has soils indicative of wet conditions (s. 23.32 (1), Wis. Stats.).

If you have questions about this, you may reach out to Madi Johansen, madison.johansen@wisconsin.gov.

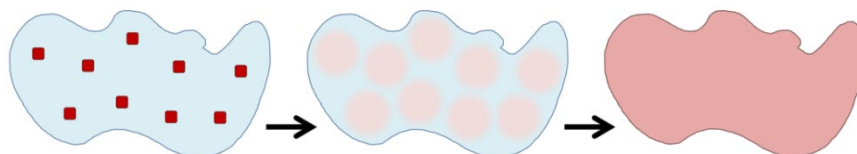
GUIDELINES FOR CALCULATING THE WHOLE WATERBODY CONCENTRATION OF LARGE-SCALE TREATMENTS

When discussing chemical management of aquatic plants in lakes, management activities are generally divided into two spatial scales. Small-scale treatments are those where the herbicide product will be applied at a concentration rate and scale where dissipation of the herbicide is not anticipated to result in significant lakewide concentrations, and effects to the plant community are anticipated to occur on a localized scale. In contrast, large-scale treatments are those in which the herbicide will be applied at a concentration rate and scale where dissipation will result in significant lakewide concentrations, and impacts to the plant community are anticipated to occur on a whole waterbody scale. When planning an herbicide treatment, it is important to calculate the whole waterbody concentration of the proposed herbicide to fully assess the potential for lakewide impacts to plants from the chemical application.

Small-Scale Use Pattern



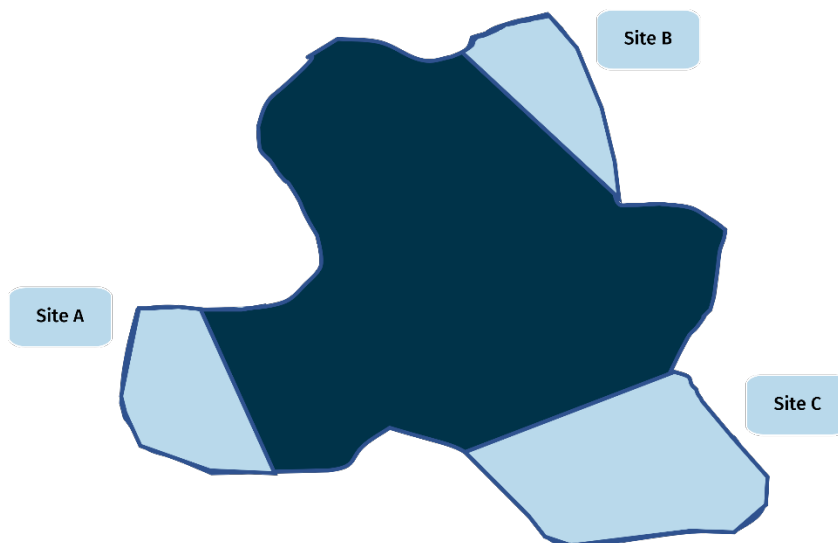
Large-Scale Use Pattern



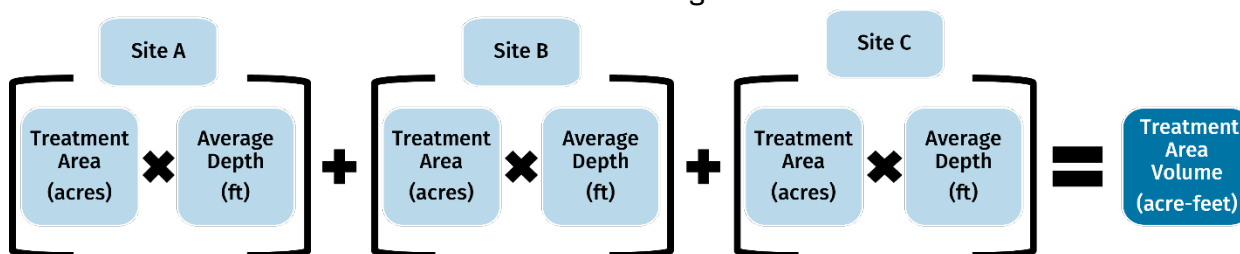
STEP 1: CALCULATE VOLUME OF TREATMENT AREA

$$\begin{array}{|c|} \hline \text{Treatment} \\ \text{Area} \\ \text{(acres)} \\ \hline \end{array} \times \begin{array}{|c|} \hline \text{Average} \\ \text{Depth} \\ \text{(ft)} \\ \hline \end{array} = \begin{array}{|c|} \hline \text{Treatment} \\ \text{Area Volume} \\ \text{(acre-feet)} \\ \hline \end{array}$$

The treatment area volume (in acre-feet) can be calculated by multiplying the area of the lake where treatment will occur (in acres) by the average mean depth of the treatment area (in feet).



If there are multiple treatment sites (as shown in the above map), the treatment area volume will need to be calculated for each individual site and added together to obtain the total treatment area volume.



STEP 2: CALCULATE AMOUNT OF HERBICIDE NEEDED FOR TREATMENT

$$\begin{aligned}
 & \text{Treatment Area Volume (acre-feet)} \times \text{Target Herbicide Concentration (ppm)} \times 2.7 = \text{Amount of Herbicide Needed (lbs a.e.)}
 \end{aligned}$$

Multiplying the treatment area volume (in acre-feet) calculated in Step 1 by the target herbicide concentration (in ppm) and then by 2.7¹ will yield the total amount of herbicide acid equivalent (in pounds acid equivalent, or lbs a.e.) needed to reach the target herbicide concentration in the treatment area. Ensure that herbicide units are in ppm when using this equation; target herbicide concentrations in other units will need to first be converted to ppm (e.g., 1 ppm = 1000 ppb). For ProcellaCOR™ EC, an application rate of 1 PDU/ac-ft is equivalent to 0.001926 ppm.

¹2.7 (in millions of lbs) is the weight of water in 1 acre-foot

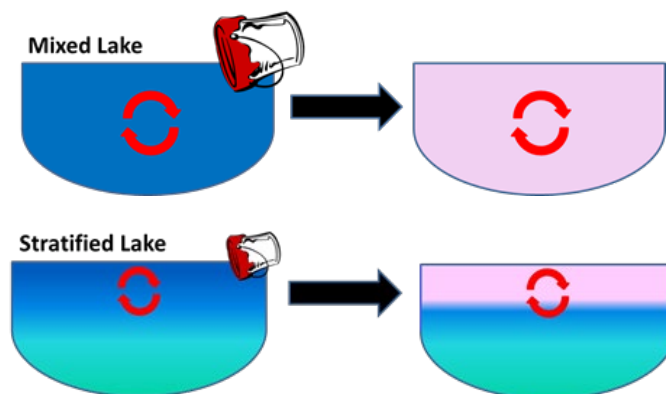
$$\frac{\text{Amount of Herbicide Needed (lbs a.e.)}}{\text{Acid Equivalent Concentration of Product (a.e./gallon)}} = \text{Amount of Herbicide Product Needed (gallons)}$$

Although not necessary for calculating the whole waterbody concentration, the gallons of herbicide product needed to reach the target concentration can be calculated by dividing the amount of herbicide needed (in lbs a.e.) by the acid equivalent concentration of the product. The acid equivalent concentration can usually be found on the first page of the product label. The Wisconsin Department of Agriculture, Trade and Consumer Protection maintains a [database](#) with current label information for all the herbicides registered for use in Wisconsin.

STEP 3: CALCULATE THE WHOLE WATERBODY CONCENTRATION

The volume of the waterbody proposed to be treated is needed to calculate the whole waterbody concentration of a chemical application. The volume used in the equation is dependent on whether the lake is likely to be stratified (separated into distinct thermal layers) or mixed at the proposed time of treatment. If the lake is not stratified (i.e., mixed), the herbicide is anticipated to move throughout the entire water column, so the entire lake volume should be used to calculate the whole waterbody concentration. However, if the lake is stratified, the herbicide is anticipated to primarily stay within the epilimnion (the upper thermal layer of a stratified lake), so only the volume of the epilimnion should be used to calculate the waterbody concentration.

The term “whole waterbody concentration” will be used to refer to both whole-lake concentrations and epilimnion concentrations throughout the remainder of this guide. Keep in mind that the “whole waterbody concentration” entered on permitting forms for stratified lakes should only account for the epilimnetic water volume and not the entire waterbody volume.



3.1 Determining Stratification

A recent temperature profile is needed to determine whether a lake is likely to be stratified during the proposed treatment and determine the maximum treatment volume. A temperature profile should be

collected as close to the treatment date as possible (if not the day of treatment) to re-evaluate stratification and adjust dosing rates if necessary. However, for the purposes of estimating the whole waterbody concentration for the permit submission process, the following methods can be used for estimating stratification. Temperature profiles for many Wisconsin lakes can be found on the Wisconsin DNR's [Lake Water Quality Data page](#). Lake monitoring reports from sites labeled “Deep Hole” are generally from the deepest portions of the lake and are most likely to contain a full temperature profile if data is available. If there are multiple temperature profiles available from different months, use the temperature profile from the month closest to when the chemical treatment is proposed. If there is no existing data available, it is recommended that a temperature profile be collected in the field prior to submitting a permit so that the potential for stratification can be accurately assessed. Temperature profile data can be collected by measuring the water temperature at intervals of at least every meter (or approximately every three feet) from the surface to the bottom of the lake.

To determine whether a lake is stratified, look for the thermocline (the transition area between the warmer, top layer and the cooler, bottom layer) in the temperature profile. The thermocline is approximately at the depth(s) in the temperature profile where the temperature changes by more than one degree Celsius per meter of depth (or roughly one degree Fahrenheit per two feet of depth). If the temperature profile does not change by more than one degree Celsius per meter at any depth, the lake may not have been stratified at the time the profile was taken or the profile was not deep enough to capture the thermocline.

3.2 Estimating Whole Lake Volume

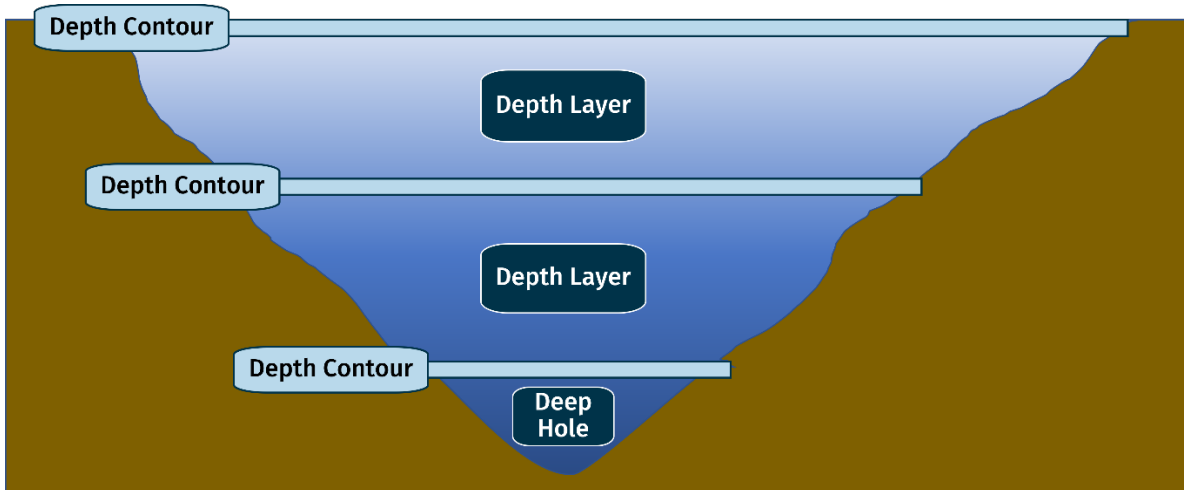
If the lake is not anticipated to be stratified at the time of the proposed treatment, the volume of the entire lake should be used to calculate the whole waterbody concentration. The whole lake volume of many Wisconsin lakes can be found in the bathymetry maps on the Wisconsin DNR's [Wisconsin Lake Maps page](#). When available, the volume is generally listed in a corner of the map. The lake volume will likely be listed in acre-feet, but pay close attention to the units, as it may need to be converted to acre-feet if not.

$$\text{Depth Layer Volume (acre-feet)} = \frac{1}{3} \times \left[\text{Depth of Deep Contour (ft)} - \text{Depth of Shallow Contour (ft)} \right] \times \left[\text{Area of Deep Contour (acres)} + \text{Area of Shallow Contour (acres)} + \sqrt{\text{Area of Deep Contour (acres)} \times \text{Area of Shallow Contour (acres)}} \right]$$

If the whole lake volume is not readily available, it can be estimated by dividing the lake into depth strata and calculating the volume separately for each layer using the above equation, which is the equation for the volume of a frustum (a cone or pyramid with the top and/or bottom cut off by a plane parallel to the base). The area for each depth layer can be derived using depths from an aquatic plant point-intercept (PI) survey, planimeter, GIS software, or based on the areas of individual depth contours within the bathymetric map. Add the depth layer volumes together to yield the whole lake volume.

$$\text{Deep Hole Volume (acre-feet)} = \frac{1}{3} \times \left[\text{Depth of Deep Hole (ft)} - \text{Depth of Deepest Contour (ft)} \right] \times \text{Area of Deepest Contour (acres)}$$

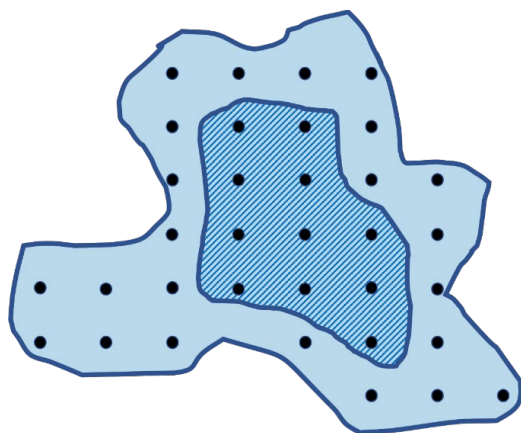
The above simplified equation can be used for calculating the volume from the deepest layer to a deep hole. It is the equation for the volume of a pyramid, so it is most accurate if the deep hole has a relatively small area, as the deep hole forms the narrow end of the pyramid.



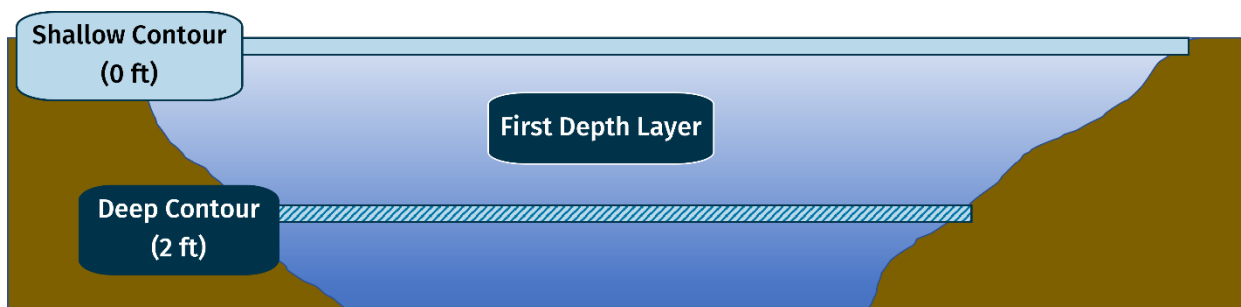
The above diagram demonstrates how the depth layers and contours would look in a cross-section of a lake.

$$\text{Area of Contour Layer (acres)} = \text{Total Area of Lake (acres)} \times \left[\frac{\text{Number of Points Deeper Than Contour Depth}}{\text{Total Number of Points on PI Grid}} \right]$$

If using water depths collected during a point-intercept survey to estimate lake volume, the area of each contour layer can be found by multiplying the percentage of points surveyed in each contour layer by the total surface area of the lake, as illustrated in the above equation. The contour layers will need to be manually delineated. The number of points used in the equation should reflect all points on the grid, not just the points that were sampled (e.g., “Number of Points Deeper Than Contour Depth” should include unsampled deep sites, and any unsampled non-navigable or shallow sites should be binned appropriately). This method may not work well for lakes with many unsampled deep points, especially if there is a large difference between the maximum depth of plant colonization and maximum lake depth.



As a conceptual example, the volume of the above lake needs to be determined using a previous PI survey. PI sampling points are represented by the black dots. The dots in the light blue section range in depth from 0-2 feet, and the dots in the darker blue section are greater than 2 feet deep. The total area of the lake is 50 acres. If the first depth layer is delineated as 0-2 feet deep, the area of the darker blue section would form the bottom of the frustum, and the area of the lighter blue AND the darker blue section together would form the top of the frustum, as illustrated in the below cross-section diagram.



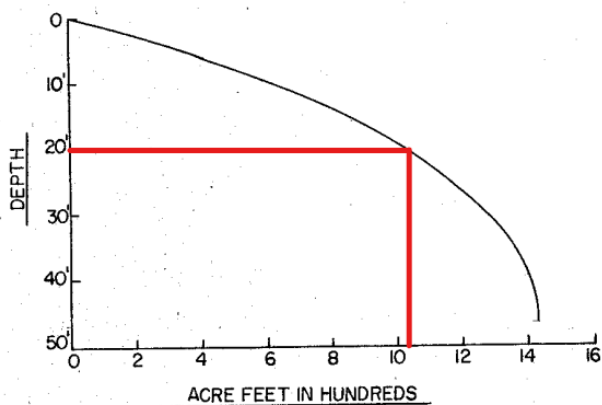
The area of the shallow contour in this example (i.e., the top of the frustum) would then be equal to 50 acres, since it is the entire surface area of the lake. The area of the deeper contour would be:

$$\text{Area of Deeper Contour Layer (acres)} = 50 \text{ acres} \times \frac{11 \text{ points in deeper contour (deeper than 2 feet)}}{34 \text{ total points}} = 16 \text{ acres}$$

3.3 Estimating Epilimnetic Volume

If the lake is likely to be stratified at the time of the proposed treatment, the volume of the epilimnion should be used as the lake volume in the whole waterbody concentration equation. The methods for calculating the epilimnetic volume use a single value for the thermocline depth, however the thermocline may be several meters wide. For the purposes of estimating the whole waterbody concentration for the permit submission process, the middle depth of the thermocline should be used. A temperature profile collected immediately prior to treatment should be collected and the thermocline re-evaluated to determine final dosing rates. Using the top depth of the thermocline in final dosing calculations will be more protective against exceeding the targeted lakewide rate, and may be appropriate depending on the strength of the waterbody's stratification pattern at the time of treatment.

The volume of the epilimnion can be found using a hypsographic curve, which shows the cumulative volume of a lake at depth. Hypsographic curves are specific to each individual waterbody and are often available in the bathymetry maps on the Wisconsin DNR's [Wisconsin Lake Maps page](#).



The above example shows how to calculate the epilimnion volume for a lake using its hypsographic curve. In this case, if the thermocline depth were at 20 feet, the epilimnion volume would be approximately 1,050 acre-feet.

If a hypsographic curve is not available, the epilimnion volume can be estimated by using the equations in Step 3.2 (“Estimating Whole Lake Volume”). The same methods for calculating the volume of each depth layer can be used, but the volume should only be calculated from the surface down to the thermocline depth. As such, the depth layers should be defined in a way so that the epilimnion is estimated as accurately as possible in the calculated volume (e.g., if the bathymetric contours for a lake were manually defined at every 5 feet but the thermocline is at 3 feet, calculating the volume of the depth layer from 0-5 feet would overestimate the volume of the epilimnion).

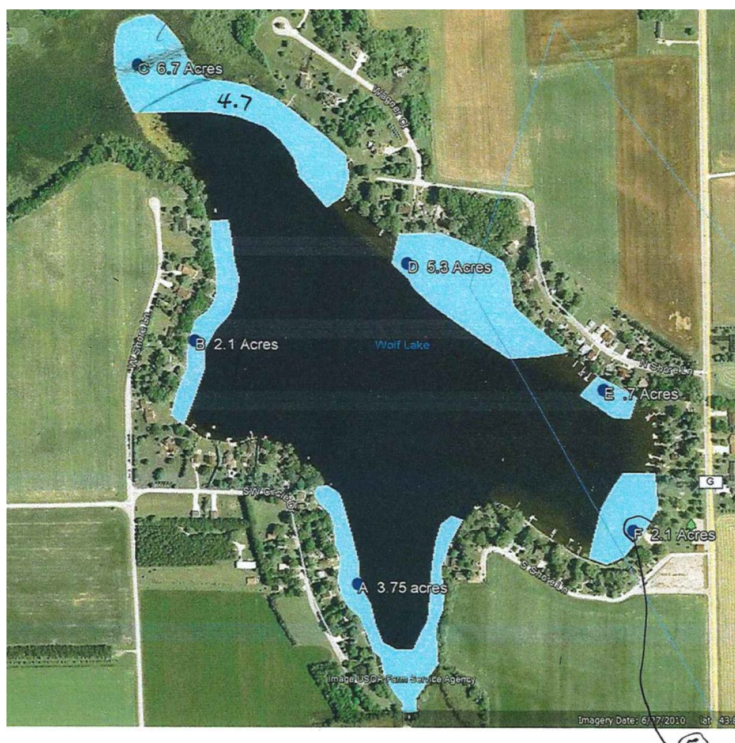
3.4 Calculating Whole Waterbody Concentration

$$\frac{\text{Amount of Herbicide Needed (lbs a.e.)}}{\left[\text{Lake Volume* (acre-feet)} \times 2.7 \right]} = \text{Whole Waterbody Concentration (ppm)}$$

*Use volume of epilimnion if lake is stratified, otherwise use whole lake volume

Finally, the whole waterbody concentration, which is the value required to be entered on permitting forms, can be found by dividing the amount of herbicide needed (calculated in Step 2) by the lake volume multiplied by 2.7.

EXAMPLE CALCULATION



Treatment Area	Estimated Acreage	Average Depth (ft)
A	3.75	3.5
B	2.10	4.0
C	4.7	3.0
D	5.3	3.0
E	0.7	3.0
F	2.1	2.5

Multiple “spots” of Eurasian watermilfoil (see above map) are proposed to be treated with 2,4-D at the maximum label rate (4.0 ppm a.e.). Treatment depth varies within each area (see above table). The surface area of the lake is 76 acres, the maximum depth is 47 feet, and it is anticipated to be thermally stratified at ~15 ft at time of treatment. A bathymetry map and a hypsographic curve are available. What is the estimated whole waterbody 2,4-D concentration (in ppm)?

First, calculate the volume of the treatment area using the equations in Step 1:

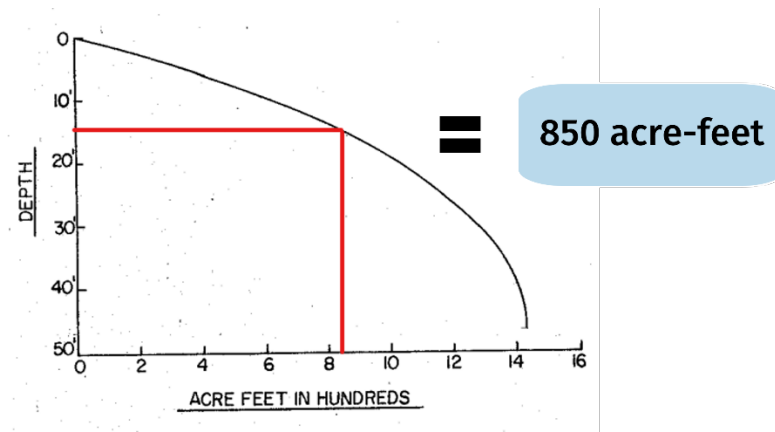
Treatment Area	Estimated Acreage	Average Depth (ft)	Treatment Area Volume (acre-feet)
A	3.75	3.5	$3.75 * 3.5 = 13.125$ acre-feet
B	2.10	4.0	$2.10 * 4.0 = 8.4$ acre-feet
C	4.7	3.0	$4.7 * 3.0 = 14.1$ acre-feet
D	5.3	3.0	$5.3 * 3.0 = 15.9$ acre-feet
E	0.7	3.0	$0.7 * 3.0 = 2.1$ acre-feet
F	2.1	2.5	$2.1 * 2.5 = 5.25$ acre-feet
TOTAL TREATMENT AREA VOLUME			58.875 acre-feet

Next, calculate the amount of herbicide needed for the

application using the calculated treatment area volume inserted into the equations in Step 2:

$$58.875 \text{ acre-feet} \times 4.0 \text{ ppm a.e.} \times 2.7 = 635.85 \text{ lbs a.e.}$$

Then, use the hypsographic curve and anticipated thermocline depth (15 feet) to calculate the volume of the epilimnion:

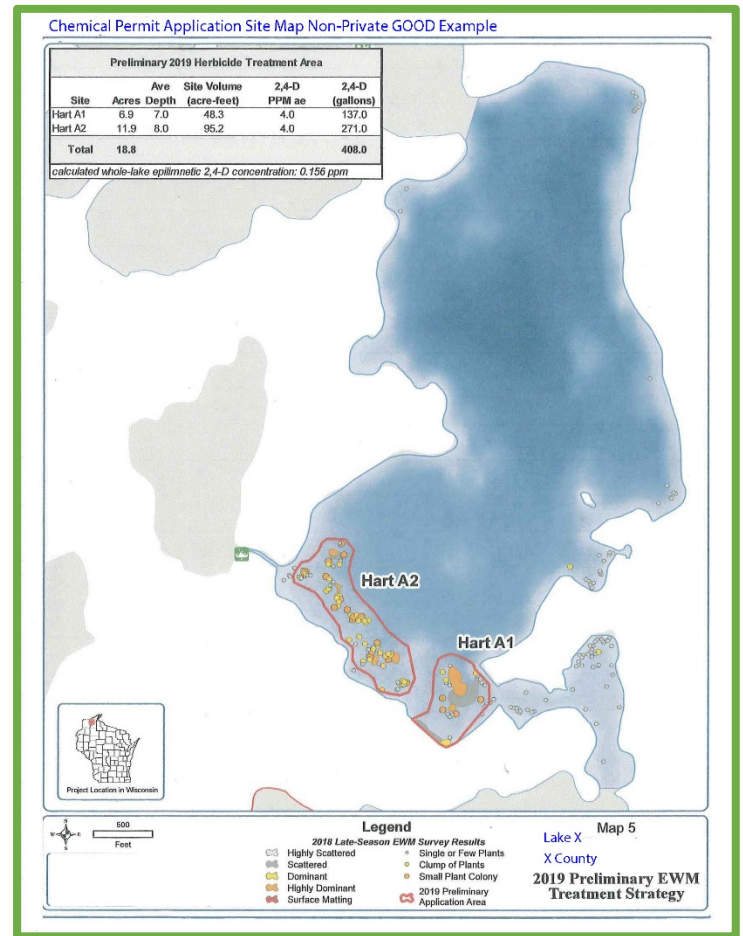
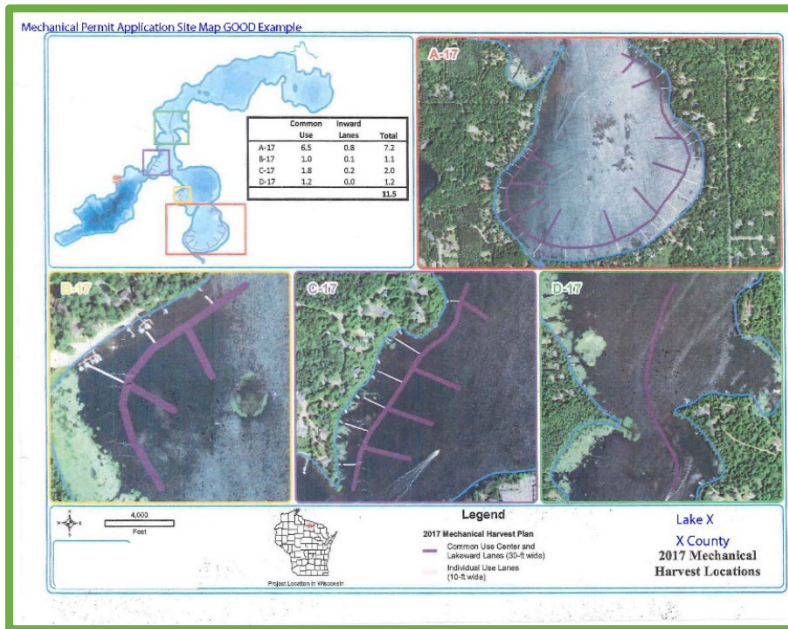


Finally, enter the lake volume (in acre-feet) and amount of herbicide needed (in lbs a.e.) into the equation from Step 3 to yield the whole waterbody concentration (in ppm).

$$\frac{635.85 \text{ lbs a.e.}}{[850 \text{ acre-feet} \times 2.7]} = 0.227 \text{ ppm a.e.}$$

Site Map Examples

Good site maps show clearly outlined polygons of proposed control areas with labels and acreage measurements corresponding to the permit application Site Tab rows. For harvesting permits, the lanes are delineated with insets showing zoomed-in views of each area. For non-private pond permits, recent aerial imagery is used with the control area outlined and street labels are present to help locate the waterbody.



For private pond permits:

- Site maps should use recent aerial imagery, accurately show the proposed control area(s), and correspond to area(s) listed on application. We should be able to easily tell what you're proposing.
- Use labels if there is more than one waterbody.
- Mismatches between the ponds listed on the permit and the ponds shown in the map are not acceptable.
- If a waterbody's size/shape has completely changed, a new map is needed.
- Drawn-in polygons are not acceptable if imagery of the waterbody exists.
- Inset maps showing context of the site's location can be helpful.



Public Notice Examples

NR107.04(3)(f) states that public notice "shall be given in 2 inch x 4 inch advertising format in the newspaper which has the largest circulation in the area affected by the application. The notice shall state the size of the proposed treatment, the approximate treatment dates, and that the public may request within 5 days of the notice that the applicant hold a public informational meeting on the proposed application." Acceptable evidence of this includes signed affidavits with notice text included, picture of public notice from the newspaper with newspaper name included, or receipt of ad purchase with the notice text, running dates, and newspaper name included. PDFs are preferred, but you may also submit Word Documents or photos.

AQUATIC PLANT TREATMENT

Affidavit of Publication

STATE OF WISCONSIN} SS
COUNTY OF ADAMS}

Elizabeth Sutcliffe, being duly sworn, says:

That she is an authorized representative of the Adams-Friendship Times-Reporter, a weekly newspaper of general circulation, printed and published in Adams, Adams County, Wisconsin; that the publication, a copy of which is attached hereto, was published in the said newspaper on the following dates:

4/13/2022

That said newspaper was regularly issued and circulated on those dates.

SIGNED:

Elizabeth Sutcliffe
Subscribed to sworn to me this 4/14/2022

A. L. Henning Schlungen
A. L. Henning Schlungen, Notary Public, State of Wisconsin.

My Commission Expires January 31, 2025

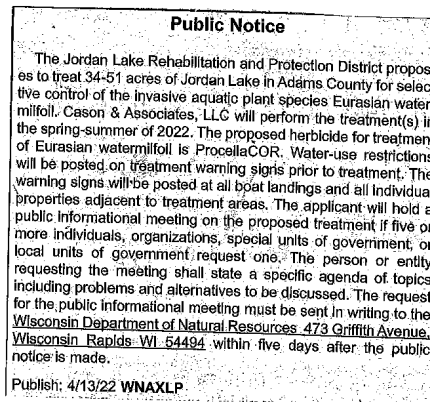
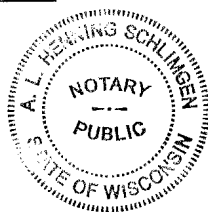
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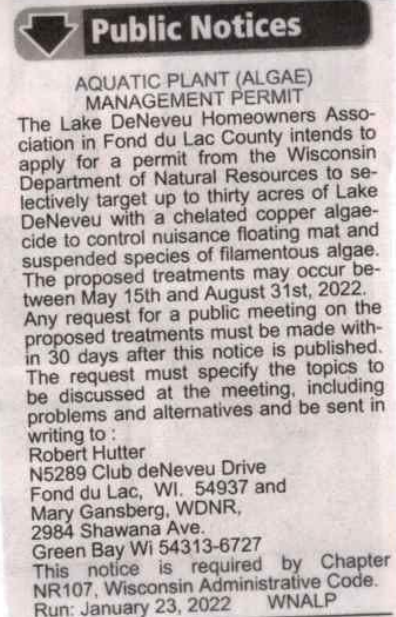
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At the Court House in the Town of
Portland, Me. Tuesday the 10th
of January 1893.
I will meeting
at 10 o'clock
and sell as
subscribed below.

Wm. J. Johnson, Clerk.

REPEATING NOTICE

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plant
le Lake





87

Troubleshooting Permit Import

If you are having trouble finding your previous permit number - Search for it by name here:

<https://permits.dnr.wi.gov/water/SitePages/Permit%20Search.aspx>

The screenshot shows the 'Welcome to the Wisconsin Department of Natural Resources Water Permit Application Site!' page. On the left, there are filter options: 'By Status', 'By County', 'By Type', and 'Date Modified'. A search bar is labeled 'Search by Applicant or Application or Project Name' and contains the text 'example lake'. Below the search bar, a table lists search results. A blue arrow points to the first result, 'AP-IP-SC-2020-14-X01-24T09-18-07', which is highlighted. The table has columns for Application, Applicant, Project Name, Type, and County.

Application	Applicant	Project Name	Type	County
AP-IP-SC-2020-14-X01-24T09-18-07	Jane Smith	Example Lake	Aquatic Plant Management	Dodge
AP-IP-SC-2020-14-X01-24T15-31-52	Jane Smith	Big Lake	Aquatic Plant Management	Dodge
AP-IP-SC-2020-54-X01-17T09-21-58	Doe John	Test 2 Private	Aquatic Plant Management	Rock

Type applicant, waterbody name, or permit name into the search box. It may help to filter by Type using the dropdown menu and selecting Aquatic Plant Management. Click the link under the “Application” column to access all the permit documents.

Department of Natural Resources Water Permit Application					
Application Files					
	File Name	File Size	Created	Modified	File Link
1	AP-IP-SC-2020-14-X01-24T09-18-07.pdf	205K	3/9/2020	3/9/2020	Download Item
2	Example Lake SC-2020-12-3456 Letter.pdf	205K	1/14/2021	1/14/2021	Download Item
3	Example Lake SC-2020-12-3456.pdf	205K	1/14/2021	1/14/2021	Download Item
4	Map_TestLake_091745.jpg	124K	3/9/2020	3/9/2020	Download Item

Both the permit and cover letter file names contain the permit number (highlighted in yellow above). You may also view the permit number inside the letter itself by clicking “Download Item” and opening the PDF.

If you are having trouble finding your previous business license number – Search for your previous permit documents using the steps above. In the permit PDF, find the number under Applicator – Business Location License #. You can also use [this site](#) to search for the business name and find the correct number.

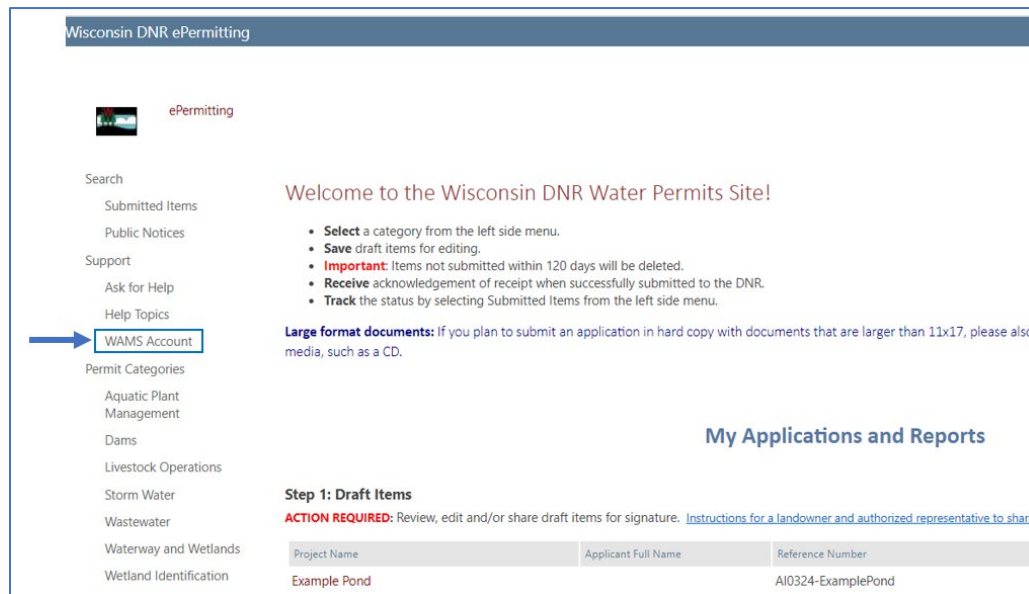
If you have your permit/business license number, but it is not validating – Make sure you are entering it exactly. It is case-sensitive and may be sensitive to special characters or extra spaces. If you are trying to use copy and paste, try manually typing it in instead. If the business license number was filled out incorrectly or missing on the permit form, it may have been corrected manually in our database. Check [this site](#) to find the correct number.

If you are sure you are entering it correctly, but it still does not validate – Email DNRAPMProgram@wi.gov or call 608-438-9919 for assistance. Please provide the number(s) you are attempting to enter. You may also proceed without using the autopopulate feature when filling out a permit application since it is optional.

If you are entering a previous permit number to pay a renewal fee and the fee amount is incorrect - Email DNRAPMProgram@wi.gov or call 608-438-9919 for assistance. Please provide the number you are attempting to enter and documentation of the correct fee amount.

Troubleshooting Signature Issues

Check that the email address associated with your WAMS account is current and correct.



Wisconsin DNR ePermitting

ePermitting

Search

- Submitted Items
- Public Notices

Support

- Ask for Help
- Help Topics
- WAMS Account**

Permit Categories

- Aquatic Plant Management
- Dams
- Livestock Operations
- Storm Water
- Wastewater
- Waterway and Wetlands
- Wetland Identification

Welcome to the Wisconsin DNR Water Permits Site!

- **Select** a category from the left side menu.
- **Save** draft items for editing.
- **Important:** Items not submitted within 120 days will be deleted.
- **Receive** acknowledgement of receipt when successfully submitted to the DNR.
- **Track** the status by selecting Submitted Items from the left side menu.

Large format documents: If you plan to submit an application in hard copy with documents that are larger than 11x17, please also media, such as a CD.

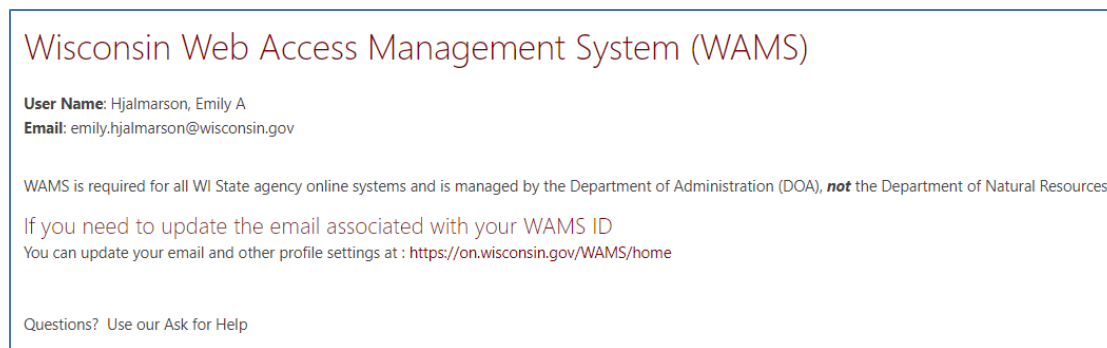
My Applications and Reports

Step 1: Draft Items

ACTION REQUIRED: Review, edit and/or share draft items for signature. [Instructions for a landowner and authorized representative to share](#)

Project Name	Applicant Full Name	Reference Number
Example Pond		AI0324-ExamplePond

Go to the [Welcome Page](#) and click **WAMS Account** under the Support section of the menu on the left hand side.



Wisconsin Web Access Management System (WAMS)

User Name: Hjalmarson, Emily A
Email: emily.hjalmarson@wisconsin.gov

WAMS is required for all WI State agency online systems and is managed by the Department of Administration (DOA), **not** the Department of Natural Resources.

If you need to update the email associated with your WAMS ID
You can update your email and other profile settings at : <https://on.wisconsin.gov/WAMS/home>

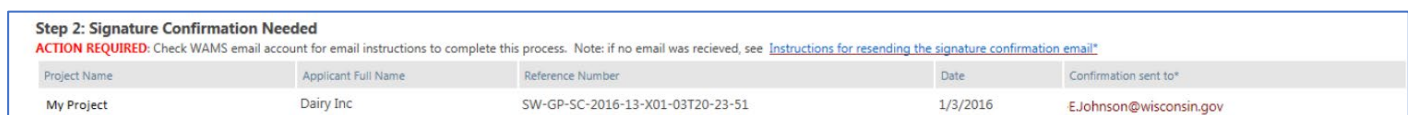
Questions? Use our Ask for Help

You should see your WAMS information and a link to update your email if necessary.

After verifying your email, check your Junk and Spam folders in case the signature email went there.

Try resending the email by following these steps:

1. On the [Welcome Page](#), locate the "Step 2: Signature Confirmation Needed" section (see example below).
2. Locate the project name for the desired application.
3. Click the **email address** under the "Confirmation sent to" column.
4. The system will open a confirmation screen, and you must click **Continue** to proceed.
5. Open your WAMS account email and open the new confirmation email.
6. Complete the instructions in the confirmation email



Step 2: Signature Confirmation Needed

ACTION REQUIRED: Check WAMS email account for email instructions to complete this process. Note: if no email was recieved, see [Instructions for resending the signature confirmation email*](#)

Project Name	Applicant Full Name	Reference Number	Date	Confirmation sent to*
My Project	Dairy Inc	SW-GP-SC-2016-13-X01-03T20-23-51	1/3/2016	E.Johnson@wisconsin.gov

If the email still does not arrive, please contact DNRAPMProgram@wisconsin.gov or call 608-438-9919.