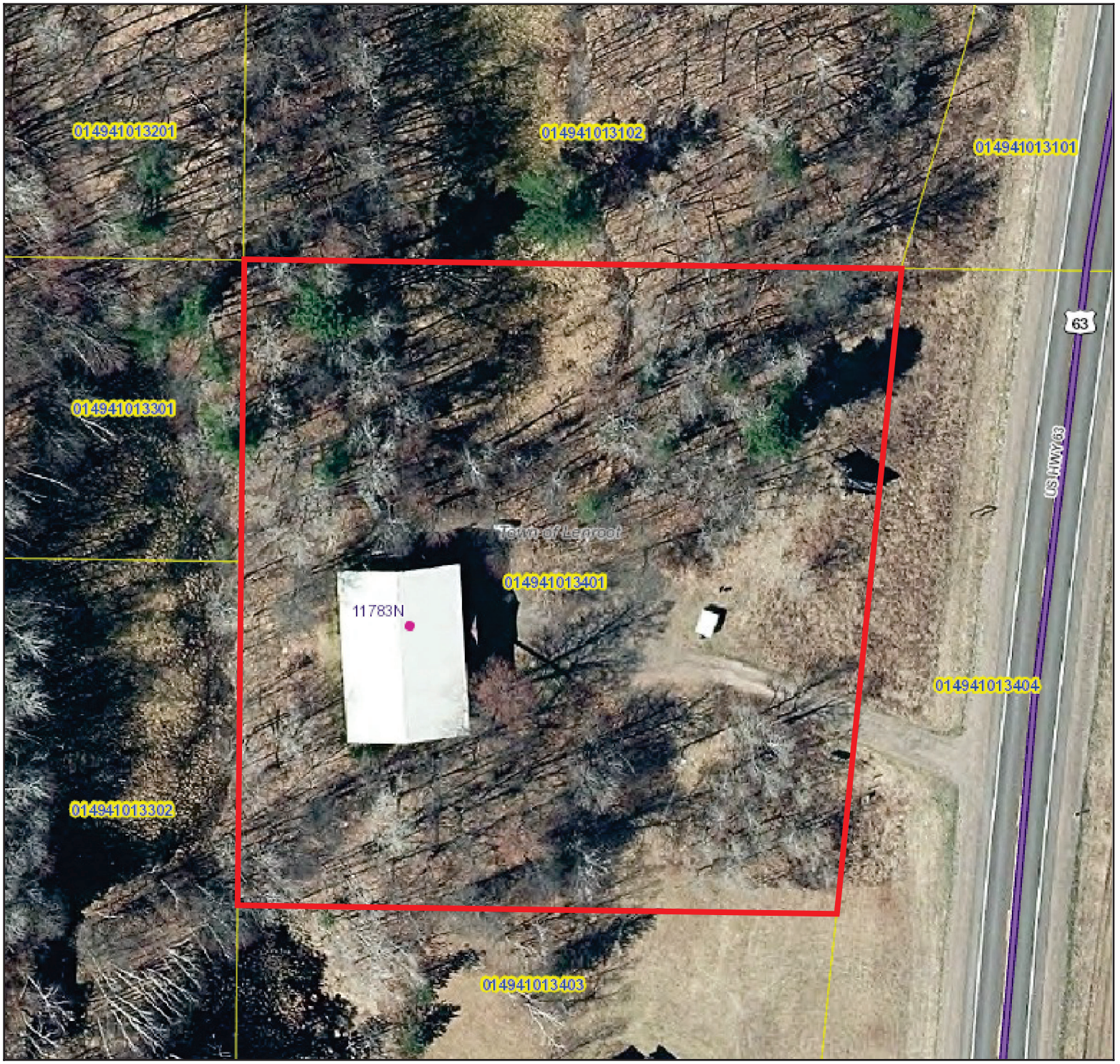


Sawyer County, WI

Legend

- Addresses
- Parcels
- Cities
- Villages
- Towns
- Sawyer County
- Other Counties
  - MI
  - MN
  - WI
- Lakes and Rivers
- Rivers and Streams
- US Highways
- State Highways
- County Highways
- Town Roads
- City and Village Roads
- Private Roads
- Recreational Trails
- WROC 6 Inch (2020) (Color)
  - Red: Band_1
  - Green: Band_2
  - Blue: Band_3

N

0 20 40 60ft

DISCLAIMER: This map is not guaranteed to be accurate, correct, current, or complete and conclusions drawn are the responsibility of the user.

Author:

Date Printed:
08/18/22 8:57 AM

Sources:

SAWYER COUNTY WISCONSIN

REAL ESTATE CONDITION REPORT

DISCLAIMER

THIS CONDITION REPORT CONCERNS THE REAL PROPERTY LOCATED AT 11783N US Hwy 63 IN THE Town (~~CITY~~) (~~VILLAGE~~) (TOWN) OF Lenroot, COUNTY OF Sawyer STATE OF WISCONSIN.

THIS REPORT IS A DISCLOSURE OF THE CONDITION OF THAT PROPERTY IN COMPLIANCE WITH SECTION 709.02 OF THE WISCONSIN STATUTES AS OF July (MONTH) 29 (DAY), 2022 (YEAR). IT IS NOT A WARRANTY OF ANY KIND BY THE OWNER OR ANY AGENTS REPRESENTING ANY PARTY IN THIS TRANSACTION AND IS NOT A SUBSTITUTE FOR ANY INSPECTIONS OR WARRANTIES THAT THE PARTIES MAY WISH TO OBTAIN.

A buyer who does not receive a fully completed copy of this report within 10 days after the acceptance of the contract of sale or option contract for the above-described real property has the right to rescind that contract (Wis. Stat. s. 709.02), provided the owner is required to provide this report under Wisconsin Statutes chapter 709.

NOTICE TO PARTIES REGARDING ADVICE OR INSPECTIONS

Real estate licensees may not provide advice or opinions concerning whether or not an item is a defect for the purposes of this report or concerning the legal rights or obligations of parties to a transaction. The parties may wish to obtain professional advice or inspections of the property and to include appropriate provisions in a contract between them with respect to any advice, inspections, defects, or warranties.

A. OWNER'S INFORMATION

A1. In this form, "aware" means the "owner(s)" have notice or knowledge.

A2. In this form, "defect" means a condition that would have a significant adverse effect on the value of the property; that would significantly impair the health or safety of future occupants of the property; or that if not repaired, removed, or replaced would significantly shorten or adversely affect the expected normal life of the premises.

A3. In this form, "owner" means the person or persons, entity, or organization that owns the above-described real property. An "owner" who transfers real estate containing one to four dwelling units, including a condominium unit and time-share property, by sale, exchange, or land contract is required to complete this report.

Exceptions: An "owner" who is a personal representative, trustee, conservator, or fiduciary appointed by or subject to supervision by a court, and who has never occupied the property transferred is not required to complete this report. An "owner" who transfers property that has not been inhabited or who transfers property in a manner that is exempt from the real estate transfer fee is not required to complete this report. (Wis. Stat. s. 709.01)

A4. The owner represents that to the best of the owner's knowledge, the responses to the following questions have been accurately checked as "yes," "no," or "not applicable (N/A)" to the property being sold. If the owner responds to any question with "yes," the owner shall provide, in the additional information area of this form, an explanation of the reason why the response to the question is "yes."

A5. If the transfer is of a condominium unit, the property to which this form applies is the condominium unit, the common elements of the condominium, and any limited common elements that may be used only by the owner of the condominium unit being transferred.

A6. The owner discloses the following information with the knowledge that, even though this is not a warranty, prospective buyers may rely on this information in deciding whether and on what terms to purchase the property. The owner hereby authorizes the owner's agents and the agents of any prospective buyer to provide a copy of this report, and to disclose any information in the report, to any person in connection with any actual or anticipated sale of the property.

CAUTION: The lists of defects following each question below are examples only and are not the only defects that may properly be disclosed in response to each respective question.

B. STRUCTURAL AND MECHANICAL

		YES	NO	N/A
B1.	Are you aware of defects in the roof? Roof defects may include items such as leakage or significant problems with gutters or eaves.	☐	☒	☐
B2.	Are you aware of defects in the electrical system? Electrical defects may include items such as electrical wiring not in compliance with applicable code, knob and tube wiring, 60 amp service, or aluminum-branch circuit wiring.	☐	☒	☐
B3.	Are you aware of defects in part of the plumbing system (including the water heater, water softener, and swimming pool)? Other plumbing system defects may include items such as leaks or defects in pipes, toilets, interior or exterior faucets, bathtubs, showers, or any sprinkler system.	☐	☒	☐
B4.	Are you aware of defects in the heating and air conditioning system (including the air filters and humidifiers)? Heating and air conditioning defects may include items such as defects in the heating ventilation and air conditioning (HVAC) equipment, supplemental heaters, ventilating fans or fixtures, or solar collectors.	☐	☒	☐
B5.	Are you aware of defects in a woodburning stove or fireplace or of other defects caused by a fire in a stove or fireplace or elsewhere on the property? Such defects may include items such as defects in the chimney, fireplace flue, inserts, or other installed fireplace equipment; or woodburning stoves not installed pursuant to applicable code.	☐	☐	☒
B6.	Are you aware of defects related to smoke detectors or carbon monoxide detectors or a violation of applicable state or local smoke detector or carbon monoxide detector laws? NOTE: State law requires operating smoke detectors on all levels of all residential properties and operating carbon monoxide detectors on all levels of most residential properties (see Wis. Stat. ch. 101).	☐	☒	☐
B7.	Are you aware of defects in the basement or foundation (including cracks, seepage, and bulges)? Other basement defects may include items such as flooding, defects in drain tiling or sump pumps, or movement, shifting, or deterioration in the foundation.	☐	☒	☐
B8.	Are you aware of defects in any structure on the property? Structural defects with respect to the residence or other improvements may include items such as movement, shifting, or deterioration in walls; major cracks or flaws in interior or exterior walls, partitions, or the foundation; wood rot; and significant problems with driveways, sidewalks, patios, decks, fences, waterfront piers or walls, windows, doors, floors, ceilings, stairways, or insulation.	☐	☒	☐
B9.	Are you aware of defects in mechanical equipment included in the sale either as fixtures or personal property? Mechanical equipment defects may include items such as defects in any appliance, central vacuum, garage door opener, in-ground sprinkler, or in-ground pet containment system that is included in the sale.	☐	☒	☐
B10.	Are you aware of rented items located on the property such as a water softener or other water conditioner system or other items affixed to or closely associated with the property?	☐	☒	☐
B11.	Are you aware of basement, window, or plumbing leaks, overflow from sinks, bathtubs, or sewers, or other ongoing water or moisture intrusions or conditions?	☐	☒	☐

B12. Explanation of "yes" responses _____

C. ENVIRONMENTAL

		YES	NO	N/A
C1.	Are you aware of the presence of unsafe levels of mold?	☐	☒	☐
C2.	Are you aware of a defect caused by unsafe concentrations of, or unsafe conditions relating to, radon, radium in water supplies, high voltage electric (100 KV or greater) or steel natural gas transmission lines located on but not directly serving the property, lead in paint, lead in soil, or other potentially hazardous or toxic substances on the property? NOTE: Specific federal lead paint disclosure requirements must be complied with in the sale of most residential properties built before 1978.	☐	☒	☐

		YES	NO	N/A
C3.	Are you aware of the presence of asbestos or asbestos-containing materials on the property?	☐	☑	☐
C4.	Are you aware of the presence of or a defect caused by unsafe concentrations of, unsafe conditions relating to, or the storage of hazardous or toxic substances on neighboring properties?	☐	☒	☐
C5.	Are you aware of current or previous termite, powder post beetle, or carpenter ant infestations or defects caused by animal, reptile, or insect infestations?	☐	☒	☐
C6.	Are you aware of water quality issues caused by unsafe concentrations of or unsafe conditions relating to lead?	☐	☒	☐
C7.	Are you aware of the manufacture of methamphetamine or other hazardous or toxic substances on the property?	☐	☒	☐

C8. Explanation of "yes" responses _____

D. WELLS, SEPTIC SYSTEMS, STORAGE TANKS

		YES	NO	N/A
D1.	Are you aware of defects in a well on the property or in a well that serves the property, including unsafe well water? Well defects may include items such as an unused well not properly closed in conformance with state regulations, a well that was not constructed pursuant to state standards or local code, or a well that requires modifications to bring it into compliance with current code specifications. Well water defects might include, but are not limited to, unsafe levels of bacteria (total Coliform and E. coli), nitrate, arsenic, or other substances affecting human consumption safety.	☐	☒	☐
D2.	Are you aware of a joint well serving the property?	☐	☒	☐
D3.	Are you aware of a defect related to a joint well serving the property?	☐	☒	☐
D4.	Are you aware that a septic system or other private sanitary disposal system serves the property?	☒	☐	☐
D5.	Are you aware of defects in the septic system or other private sanitary disposal system on the property or any out-of-service septic system that serves the property and that is not closed or abandoned according to applicable regulations? Septic system defects may include items such as backups in toilets or in the basement; exterior ponding, overflows, or backups; or defective or missing baffles.	☐	☒	☐
D6.	Are you aware of underground or aboveground fuel storage tanks on or previously located on the property? (If "yes," the owner, by law, may have to register the tanks with the Wisconsin Department of Agriculture, Trade and Consumer Protection at P.O. Box 8911, Madison, Wisconsin, 53708, whether the tanks are in use or not. Regulations of the Wisconsin Department of Agriculture, Trade and Consumer Protection may require the closure or removal of unused tanks.)	☐	☑	☐
D7.	Are you aware of defects in the underground or aboveground fuel storage tanks on or previously located on the property? Defects in underground or aboveground fuel storage tanks may include items such as abandoned tanks not closed in conformance with applicable local, state, and federal law; leaking; corrosion; or failure to meet operating standards.	☐	☒	☐
D8.	Are you aware of an "LP" tank on the property? (If "yes," specify in the additional information space whether the owner of the property either owns or leases the tank.)	☒	☐	☐
D9.	Are you aware of defects in an "LP" tank on the property?	☐	☒	☐

D10. Explanation of "yes" responses
D.4. Septic on Property – Two bedroom system
D.8. LP Tank Leases

E. TAXES, SPECIAL ASSESSMENTS, PERMITS, ETC.

		YES	NO	N/A
E1.	Have you received notice of property tax increases, other than normal annual increases, or are you aware of a pending property reassessment?	☐	☒	☐
E2.	Are you aware that remodeling was done that may increase the property's assessed value?	☐	☒	☐

		YES	NO	N/A
E3.	Are you aware of pending special assessments?	☐	☒	☐
E4.	Are you aware that the property is located within a special purpose district, such as a drainage district, that has the authority to impose assessments against the real property located within the district?	☐	☒	☐
E5.	Are you aware of any proposed construction of a public project that may affect the use of the property?	☐	☒	☐
E6.	Are you aware of any remodeling, replacements, or repairs affecting the property's structure or mechanical systems that were done or additions to this property that were made during your period of ownership without the required permits?	☐	☒	☐
E7.	Are you aware of any land division involving the property for which a required state or local permit was not obtained?	☐	☒	☐

E8. Explanation of "yes" responses _____

F. LAND USE

		YES	NO	N/A
F1.	Are you aware of the property being part of or subject to a subdivision homeowners' association?	☐	☐	☒
F2.	If the property is not a condominium unit, are you aware of common areas associated with the property that are co-owned with others?	☐	☐	☒
F3.	Are you aware of any zoning code violations with respect to the property?	☐	☒	☐
F4.	Are you aware of the property or any portion of the property being located in a floodplain, wetland, or shoreland zoning area?	☒	☐	☐
F5.	Are you aware of nonconforming uses of the property? A nonconforming use is a use of land, a dwelling, or a building that existed lawfully before the current zoning ordinance was enacted or amended, but that does not conform to the use restrictions in the current ordinance.	☐	☒	☐
F6.	Are you aware of conservation easements on the property? A conservation easement is a legal agreement in which a property owner conveys some of the rights associated with ownership of his or her property to an easement holder such as a governmental unit or a qualified nonprofit organization to protect the natural habitat of fish, wildlife, or plants or a similar ecosystem, preserve areas for outdoor recreation or education, or for similar purposes.	☐	☒	☐
F7.	Are you aware of restrictive covenants or deed restrictions on the property?	☐	☒	☐
F8.	Other than public rights of ways, are you aware of nonowners having rights to use part of the property, including, but not limited to, private rights-of-way and easements other than recorded utility easements?	☐	☒	☐
F9.	Are you aware of the property being subject to a mitigation plan required under administrative rules of the Wisconsin Department of Natural Resources related to county shoreland zoning ordinances, which obligates the owner of the property to establish or maintain certain measures related to shoreland conditions and which is enforceable by the county?	☐	☐	☒
F10.	The use value assessment system values agricultural land based on the income that would be generated from its rental for agricultural use rather than its fair market value. When a person converts agricultural land to a non agricultural use (e.g., residential or commercial development), that person may owe a conversion charge. For more information visit https://www.revenue.wi.gov/Pages/FAQS/slf-useassmt.aspx or (608) 266-2486.			
	a. Are you aware of all or part of the property having been assessed as agricultural land under Wis. Stat. s. 70.32 (2r) (use value assessment)?	☐	☐	☒
	b. Are you aware of the property having been assessed a use-value assessment conversion charge relating to this property? (Wis. Stat. s. 74.485 (2))	☐	☐	☒
	c. Are you aware of the payment of a use-value assessment conversion charge having been deferred relating to this property? (Wis. Stat. s. 74.485 (4))	☐	☐	☒

		YES	NO	N/A
F11.	Is all or part of the property subject to or in violation of a farmland preservation agreement? Early termination of a farmland preservation agreement or removal of land from such an agreement can trigger payment of a conversion fee equal to 3 times the class 1 "use value" of the land. Visit https://datcp.wi.gov/Pages/Programs_Services/FarmlandPreservation.aspx for more information.	☐	☒	☐
F12.	Is all or part of the property subject to, enrolled in, or in violation of the Forest Crop Law, Managed Forest Law, the Conservation Reserve Program, or a comparable program?	☐	☒	☐
F13.	Are you aware of a dam that is totally or partially located on the property or that an ownership in a dam that is not located on the property will be transferred with the property because it is owned collectively by members of a homeowners' association, lake district, or similar group? (If "yes," contact the Wisconsin Department of Natural Resources to find out if dam transfer requirements or agency orders apply.)	☐	☒	☐
F14.	Are you aware of boundary or lot line disputes, encroachments, or encumbrances (including a joint driveway) affecting the property? Encroachments often involve some type of physical object belonging to one person but partially located on or overlapping on land belonging to another; such as, without limitation, fences, houses, garages, driveways, gardens, and landscaping. Encumbrances include, without limitation, a right or claim of another to a portion of the property or to the use of the property such as a joint driveway, liens, and licenses.	☐	☒	☐
F15.	Are you aware there is not legal access to the property?	☐	☒	☐
F16.	Are you aware of federal, state, or local regulations requiring repairs, alterations, or corrections of an existing condition? This may include items such as orders to correct building code violations.	☐	☒	☐
F17.	Are you aware of a pier attached to the property that is not in compliance with state or local pier regulations? See http://dnr.wi.gov/topic/waterways for more information.	☐	☒	☐
F17m.	*Are you aware of a written agreement affecting riparian rights related to the property?*	☐	☒	☐
F17n.	*Are you aware that the property abuts the bed of a navigable waterway that is owned by a hydroelectric operator?* *Under Wis. Stat. s. 30.132, the owner of a property abutting the bed of a navigable waterway that is owned by a hydroelectric operator, as defined in s. 30.132 (1) (b), may be required to ask the permission of the hydroelectric operator to place a structure on the bed of the waterway.*	☐	☒	☐
F18.	Are you aware of one or more burial sites on the property? (For information regarding the presence, preservation, and potential disturbance of burial sites, contact the Wisconsin Historical Society at 800-342-7834 or www.wihist.org/burial-information).	☐	☒	☐

F19. Explanation of "yes" responses

F.4. Pond on Property

G. ADDITIONAL INFORMATION

		YES	NO	N/A
G1.	Have you filed any insurance claims relating to damage to this property or premises within the last five years?	☐	☒	☐
G2.	Are you aware of a structure on the property that is designated as a historic building or that all or any part of the property is in a historic district?	☐	☒	☐
G3.	Are you aware of any agreements that bind subsequent owners of the property, such as a lease agreement or an extension of credit from an electric cooperative?	☐	☒	☐
G4.	Are you aware of other defects affecting the property? Other defects might include items such as drainage easement or grading problems; excessive sliding, settling, earth movements, or upheavals; or any other defect or material condition.	☐	☒	☐
G4m.	Is the owner a foreign person, as defined in 26 USC 1445 (f)? (E.g. a nonresident alien individual, foreign corporation, foreign partnership, foreign trust, or foreign estate.) Section 1445 of the Internal Revenue Code (26 USC 1445), also known as the Foreign Investment In Real Property Tax Act or FIRPTA, provides that a transferee (buyer) of a U.S. real property interest must be notified in writing and must withhold tax if the transferor (seller) is a foreign person, unless an exception under FIRPTA applies to the transfer.	☐	☒	☐

G5. The owner has owned the property for 28 years.
G6. The owner has lived in the property for 28 years.
G7. Explanation of "yes" responses _____

Notice: You may obtain information about the sex offender registry and persons registered with the registry by contacting the Wisconsin Department of Corrections at http:www.doc.wi.gov or by phone at 608-240-5830

OWNER'S CERTIFICATION

NOTE: Wisconsin Statute section 709.035 requires owners who, prior to acceptance of a purchase contract or an option to purchase, obtain information that would change a response on this report to submit a complete amended report or an amendment to the previously completed report to the prospective buyer within 10 days of acceptance.

The owner certifies that the information in this report is true and correct to the best of the owner's knowledge as of the date on which the owner signs this report.

Owner Jean F Burmeister Date 7-29-22
Owner _____ Date _____
Owner _____ Date _____
Owner _____ Date _____
Owner _____ Date _____

CERTIFICATION BY PERSON SUPPLYING INFORMATION

A person other than the owner certifies that the person supplied information on which the owner relied for this report and that the information is true and correct to the best of the person's knowledge as of the date on which the person signs this report.

Person _____ Items _____ Date _____
Person _____ Items _____ Date _____
Person _____ Items _____ Date _____

BUYER'S ACKNOWLEDGEMENT

The prospective buyer acknowledges that technical knowledge such as that acquired by professional inspectors may be required to detect certain defects such as the presence of asbestos, building code violations, and floodplain status.

I acknowledge receipt of a copy of this statement.

Prospective buyer _____ Date _____
Prospective buyer _____ Date _____
Prospective buyer _____ Date _____
Prospective buyer _____ Date _____
Prospective buyer _____ Date _____

Information appearing in italics is supplemental in nature and is not required pursuant to Section 709.03 of the Wisconsin Statutes.

Real Estate Sawyer County Zoning Documents

Property Status: Current

POWTS

POWT Type	Notes	Updated By:	Updated On:
Conventional	Note Manhole is under a sidewalk.	conversion-Carmody Systems	04/25/1994
Maint Pump 4/12/2017		Affordable Septic Service, Inc.	07/15/2017

Notification

Notes	Updated By:	Updated On:
No Notification found for this property		

Permit

Permit No | Type | Issue Date	Updated By:	Updated On:
94-078 LUP 5/5/1994	**conversion-Legacy Permit System**	**01/01/2019**
94-039 SAN 4/25/1994	**conversion-Legacy Permit System**	**01/01/2019**
Document 014-941-01-3401-SAN-1994-039 SAN Document		
94-056 CST 4/25/1994	**conversion-Legacy Permit System**	**01/01/2019**
Document 014-941-01-3401-CST-1994-056 CST Document		
98-672 LUP 11/16/1998	**conversion-Legacy Permit System**	**01/01/2019**

Tax ID:	17448
PIN:	57-014-2-41-09-01-3 04-000-000010
Legacy PIN:	014941013401
Map ID:	.12.1

Documents

Certified Soil Test 014-941-01-3401-CST-1994-056
Sanitary Permit 014-941-01-3401-SAN-1994-039

Display Document

SANITARY PERMIT APPLICATION

In accord with ILHR 83.05, Wis. Adm. Code

CST 94-056

94-039

–Attach complete plans (to the county copy only) for the system, on paper not less than 8½ x 11 inches in size.

–See reverse side for instructions for completing this application.

COUNTY: Sawyer

STATE SANITARY PERMIT #: 210120 ☐ Check if revision to previous application

STATE PLAN I.D. NUMBER: 593-21363

I. APPLICANT INFORMATION – PLEASE PRINT ALL INFORMATION.

PROPERTY OWNER: Just For The Birds, Inc. JAMES BURMEISTER-OWNER

PROPERTY LOCATION: SE ¼ SW¼, S 1 T 41, N, R 9 E (or) W

PROPERTY OWNER'S MAILING ADDRESS: P. O. Box 716

LOT #: —

BLOCK #: —

CITY, STATE: Hayward, WI

ZIP CODE: 54843

PHONE NUMBER: (715)

SUBDIVISION NAME OR CSM NUMBER: —

II. TYPE OF BUILDING: (Check one)

☐ State Owned ☒ Public ☒ 1 or 2 Fam. Dwelling–# of bedrooms 2

☐ CITY ☐ VILLAGE ☒ TOWN OF: LENROOT

NEAREST ROAD: HWY 63

PARCEL TAX NUMBER(S): — 014-941-01-3401

III. BUILDING USE: (If building type is public, check all that apply)

1 ☒ Apt/Condo
2 ☐ Assembly Hall
3 ☐ Campground
4 ☐ Church/School
5 ☐ Hotel/Motel
6 ☐ Medical Facility/Nursing Home
7 ☒ Merchandise: Sales/Repairs
8 ☐ Mobile Home Park
9 ☐ Office/Factory
10 ☐ Outdoor Recreational Facility
11 ☐ Restaurant/Bar/Dining
12 ☐ Service Station/Car Wash
13 ☐ Other: Specify _____

IV. TYPE OF PERMIT: (Check only one in line A. Check line B if applicable)

A) 1. ☒ New System 2. ☐ Replacement System 3. ☐ Replacement of Tank Only 4. ☐ Reconnection of Existing System 5. ☐ Repair of an Existing System

B) ☐ A Sanitary Permit was previously issued. Permit # _____ Date Issued _____

V. TYPE OF SYSTEM: (Check only one)

Non-Pressurized Distribution
11 ☒ Seepage Bed
12 ☐ Seepage Trench
13 ☐ Seepage Pit
14 ☐ System-In-Fill

Pressurized Distribution
21 ☐ Mound
22 ☐ In-Ground Pressure

Experimental
30 ☐ Specify Type _____

Other
41 ☐ Holding Tank
42 ☐ Pit Privy
43 ☐ Vault Privy

VI. ABSORPTION SYSTEM INFORMATION:

1. GALLONS PER DAY	2. ABSORP. AREA REQUIRED (sq. ft.)	3. ABSORP. AREA PROPOSED (sq. ft.)	4. LOADING RATE (Gals/day/sq. ft.)	5. PERC. RATE (Min./Inch)	6. SYSTEM ELEV.	7. FINAL GRADE ELEVATION
486	934	936	.52	<10	103.28 Feet	108 Feet

VII. TANK INFORMATION

	CAPACITY in gallons: New Tanks	CAPACITY in gallons: Existing Tanks	Total Gallons	# of Tanks	Manufacturer's Name	Prefab. Concrete	Site Constructed	Steel	Fiberglass	Plastic	Exper. App.
~~Septic Tank or Holding Tank~~	X		1250	1	HUFFCUTT	☒	☐	☐	☐	☐	☐
Lift Pump Tank/Siphon Chamber						☐	☐	☐	☐	☐	☐

VIII. RESPONSIBILITY STATEMENT

I, the undersigned, assume responsibility for installation of the onsite sewage system shown on the attached plans.

Plumber's Name (Print): ANDRY RASMUSSEN

Plumber's Signature: (No Stamps) Andry Rasmussen

MP/MPRSW No.: 3938

Business Phone Number: (715) 798-3335

Plumber's Address (Street, City, State, Zip Code): P.O. Box 66, Cable, WI 54821

IX. COUNTY/DEPARTMENT USE ONLY

☒ Approved ☐ Disapproved ☐ Owner Given Initial Adverse Determination

Sanitary Permit Fee (Includes Groundwater Surcharge Fee): $150.00

Date Issued: 4-25-94

Issuing Agent Signature (No Stamps): Cindy Kuczenski

X. CONDITIONS OF APPROVAL/REASONS FOR DISAPPROVAL:

SBD-6398 (formerly Pib-67) (R. 11/88) DISTRIBUTION: Original to County, One Copy To: Safety & Buildings Division, Owner, Plumber

INSTRUCTIONS

1. A sanitary permit is valid for two (2) years.
2. Your sanitary permit may be renewed before the expiration date, and at the time of renewal any new criteria in the Wisconsin Administrative Code will be applicable.
3. All revisions to this permit must be approved by the permit issuing authority.
4. Changes in ownership or plumber requires a Sanitary Permit Transfer/Renewal Form (SBD 6399) to be submitted to the county prior to installation.
5. Onsite sewage systems must be properly maintained. The septic tank(s) must be pumped by a licensed pumper whenever necessary, usually every 2 to 3 years.
6. If you have questions concerning your onsite sewage system, contact your local code administrator or the State of Wisconsin, Safety & Buildings Division, 608-266-3815.

To be complete and accurate this sanitary permit application must include:

I. Property owner's name and mailing address. Provide the legal description and parcel tax number(s) of where the system is to be installed.

II. Type of building being served. Check only one and complete # of bedrooms if 1 or 2 Family Dwelling.

III. Building use. If building type is Public, check all appropriate boxes that apply.

IV. Type of permit. Check only one in line A. Complete line B if permit is for tank replacement, reconnection, or repair.

V. Type of system. Check appropriate box depending on system type.

VI. Absorption system information. Provide all information requested in #1-7.

VII. Tank information. Fill in the capacity of every new and/or existing tank, list the total gallons, number of tanks and manufacturer's name. Indicate prefab or site constructed and tank material. Complete for *all* septic, pump/siphon and holding tanks for this system. Check experimental approval only if tanks received experimental product approval from DILHR.

VIII. Responsibility statement. Installing plumber is to fill in name, license number with appropriate prefix (e.g. MP, etc.), address and phone number. Plumber must sign application form.

IX. County/Department Use Only.

X. County/Department Use Only.

Complete plans and specifications not smaller than 8½ × 11 inches must be submitted to the county. The plans must include the following: A) plot plan, drawn to scale or with complete dimensions, location of holding tank(s), septic tank(s) or other treatment tanks; building sewers; wells; water mains/water service; streams and lakes; pump or siphon tanks; distribution boxes; soil absorption systems; replacement system areas; and the location of the building served; B) horizontal and vertical elevation reference points; C) complete specifications for pumps and controls; dose volume; elevation differences; friction loss; pump performance curve; pump model and pump manufacturer; D) cross section of the soil absorption system if required by the county; E) soil test data on a POWTS form; and F) all sizing information.

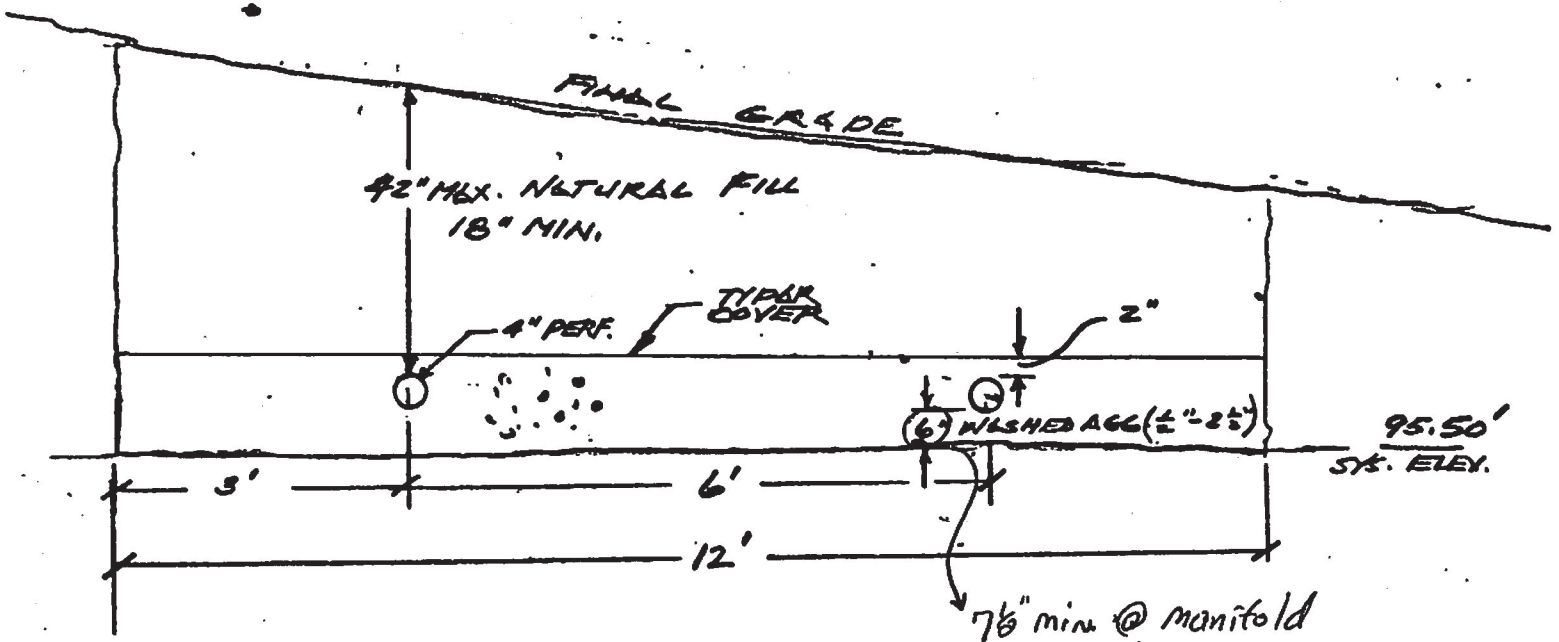
GROUNDWATER SURCHARGE

1983 Wisconsin Act 410 included the creation of surcharges (fees) for a number of regulated practices which can effect groundwater.

The monies collected through these surcharges are used for monitoring groundwater, groundwater contamination investigations and establishment of standards.

JIM BURMEISTER
"FOR THE BIRDS"

PRIVATE SEWAGE SYSTEM
Conditionally
APPROVED
DEPT. OF INDUSTRY, LABOR & HUMAN RELATIONS
DIVISION OF SAFETY AND BUILDINGS
Stanley E. Davies Jr.
SEE CORRESPONDENCE



— CROSS-SECTION —
(NO SCALE)

S93-21363
11-26-93

014-941-01-3401

Mac -

Potential buyers want to open a bar/grill in this building. I know they need a LUP, will also need to address the septic. Has been a retail shop w/ workers and 3BR residence. Estimate seating capacity of 50. I told them the septic would have to be addressed before a permit could be issued.

est. – Example 10-28

50 seating Cafe	50 X 22	1100 gpd
floor drain	2 X 25	50
4 employees	4 X 13	52
		1202
Ex 486 gpd	X	1.5
		1803
+2 bd Apt 150/bd		300
		2103 gpd

Deb 10-28

Ex system, 2 bd + retail + employees

" " 1250 S.T., bed 936 ft

Need info: bar/grill ?

- bar seating
- dining seating
- employees
- floor drain
- +2 bd res.

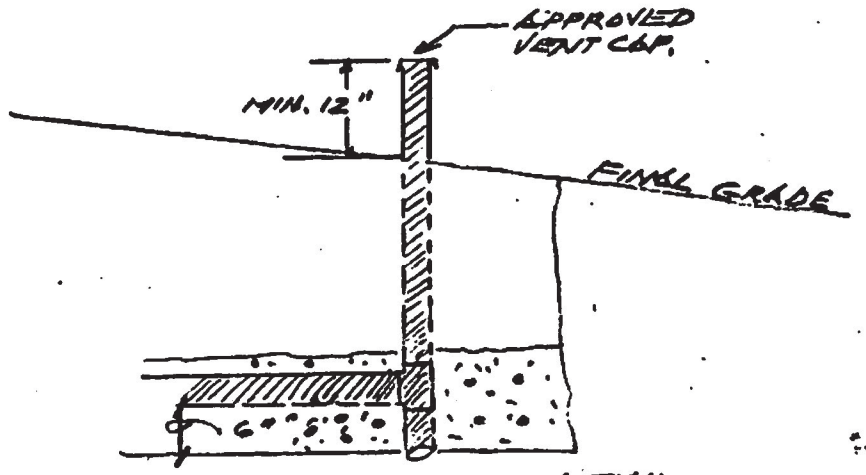
need total gal/day

must have 1000 gal grease trap

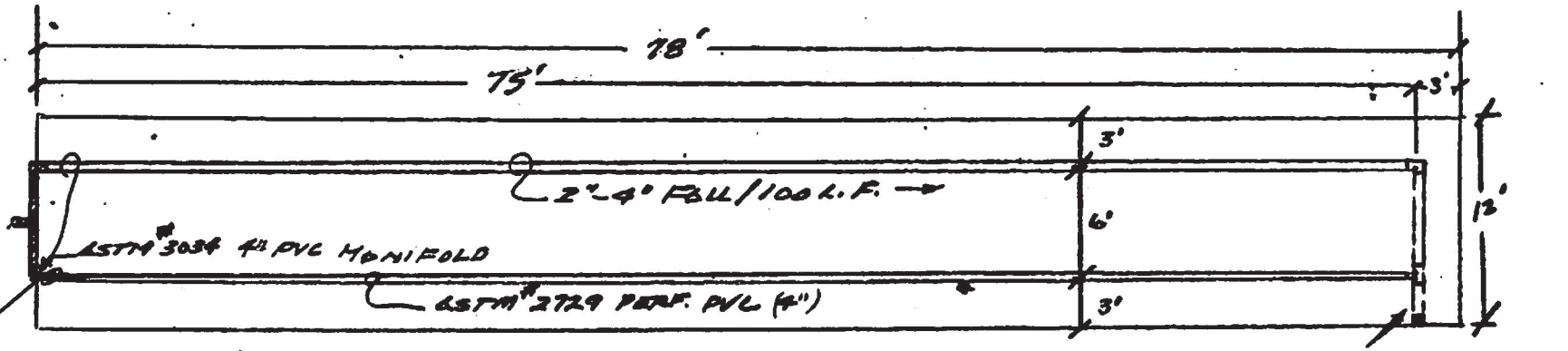
– Call Mac –

JIM BURMEISTER

PRIVATE SEWAGE SYSTEM
Conditionally
APPROVED
DEPT. OF INDUSTRY, LABOR & HUMAN RELATIONS
DIVISION OF SAFETY AND BUILDINGS
Stanley E. Durin Jr.
SEE CORRESPONDENCE



VENT & INVERT DETAIL
(NO SCALE)



Note: Must be solid wall piping to at least 1' from end wall.

— DRAINFIELD LAYOUT —
(NO SCALE)

S93-21363

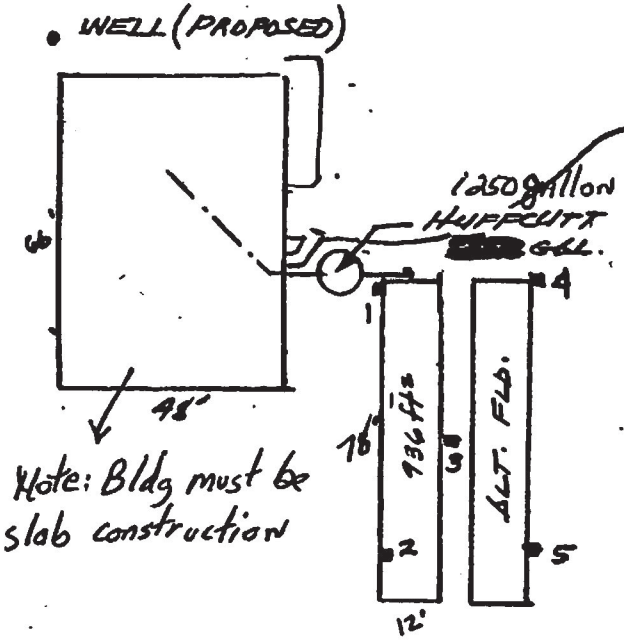
"FOR THE BIRDS"
JIM BURMEISTER
P.O. BOX 716
HAYWARD, WI 54843

SW, SW, 1, 41, 9W
LENROOT TN.
SAWYER CO., WI.

N

SCALE: 1" = 40'

- SEPTIC (BASIC) 750 GAL.
  2 BD. RM APT @ 150 300 GAL
  1 - F. DRN. @ 50 50 GAL.
  9 - RETAIL @ 1.5 13.5 "
  6 - EMPLOYEES @ 20 = 120 GAL
  1233.5
- DRN. FLD.
  2 - APT X 140 X 1.5 = 420
  1 - F. DRN. @ 140 X 1 140
  9 - RETAIL X 140 X .03 38
  6 - EMPL X 140 X .4 336
  934 ft.



PROPOSED PRN. DR.

PRIVATE SEWAGE SYSTEM
Conditionally
APPROVED
DEPT. OF INDUSTRY, LABOR & HUMAN RELATIONS
DIVISION OF SAFETY AND BUILDINGS
Stanley E. Davey Jr.
SEE CORRESPONDENCE

OLD FENCE LINE

CORNER FENCE POLE

US HWY 63

▲ VRP 100' @ TOP 1½" PVC PIPE ±4" ABOVE GROUND @ BASE OF POWER POLE

■ SOIL BORING
ELEV. @ #1 — 106.70'
2 — 105.95'
3 — 104.95'
4 — 104.50'
5 — 103.75'
SYSTEM ELEV — 103.28'

Note: Replacement system elevation to be designated as 102'

11-20-93
M.P. 3938

S93-21363

Wisconsin Department of Industry,
Labor and Human Relations
Safety and Buildings Division

PRIVATE SEWAGE SYSTEM INSPECTION REPORT
(ATTACH TO PERMIT)

County: Sawyer
Sanitary Permit No.: 210120 / 94-039
State Plan ID No.: S 93 - 21363
Parcel Tax No.: 014 - 941 - 01 - 3401

GENERAL INFORMATION

Permit Holder's Name: James Burmeister
☐ City ☐ Village ☒ Town of: Lenroot
CST BM Elev.:
Insp. BM Elev.: 100'
BM Description: Power Pole

TANK INFORMATION

TYPE	MANUFACTURER	CAPACITY
Septic	Hoffcutt	1250
Dosing		
Aeration		
Holding		

TANK SETBACK INFORMATION

TANK TO	P/L	WELL	BLDG.	Vent to Air Intake	ROAD
Septic	+50	+40	+10'	+25'	NA
Dosing					NA
Aeration					NA
Holding					

PUMP / SIPHON INFORMATION

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

ELEVATION DATA

STATION	BS	HI	FS	ELEV.
Benchmark				100'
Bldg. Sewer				
St / Ht Inlet				92.12
St / Ht Outlet				91.88
Dt Inlet				
Dt Bottom				
Header / Man.				90.70
Dist. Pipe				90.54
Bot. System				
Final Grade				

SOIL ABSORPTION SYSTEM 936 ft²

BED / TRENCH DIMENSIONS	Width 12'	Length 78'	No. Of Trenches —

SETBACK INFORMATION	SYSTEM TO	P/L	BLDG	WELL	LAKE / STREAM
	Type Of System: Bed				

PIT DIMENSIONS	No. Of Pits	Inside Dia.	Liquid Depth

LEACHING CHAMBER OR UNIT	Manufacturer:
	Model Number:

DISTRIBUTION SYSTEM

Header / Manifold	Distribution Pipe(s)	x Hole Size	x Hole Spacing	Vent To Air Intake
Length ____ Dia. ____	Length ____ Dia. ____ Spacing ____			

SOIL COVER

x Pressure Systems Only xx Mound Or At-Grade Systems Only

Depth Over Bed / Trench Center	Depth Over Bed / Trench Edges	xx Depth Of Topsoil	xx Seeded / Sodded	xx Mulched
			☐ Yes ☐ No	☐ Yes ☐ No

COMMENTS: (Include code discrepancies, persons present, etc.)

Dba — "Just for the Birds"

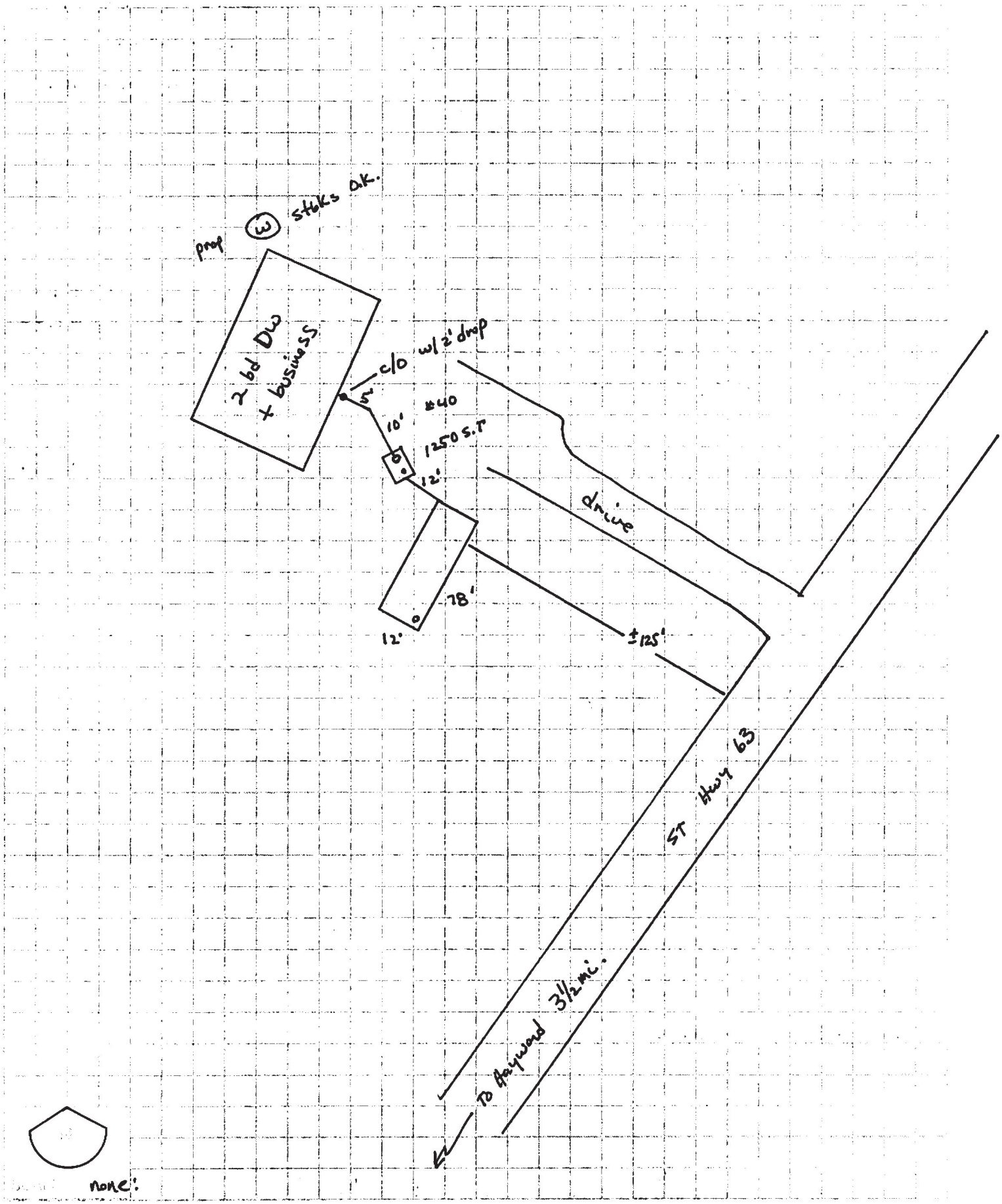
Plan revision required? ☐ Yes ☒ No
Use other side for additional information.

Date	Inspector's Signature	Cert. No.
6 22 94	MW Maki	5238

SBD-6710 (R 05/91)

ADDITIONAL COMMENTS AND SKETCH

SANITARY PERMIT NUMBER: 94 - 039



SAWYER	% JAMES BURMEISTER	P.O. BOX 716 HAYWARD, WI 54843

USE

Residence	NO. BEDRMS.	COMMERCIAL DESCRIPTION	New	Replace
☒	2	EMPLOYEES (6) RETAIL (9) FLOOR DRN. (1)	☒	☐

DATES OBSERVATIONS MADE

PROFILE DESCRIPTIONS:	PERCOLATION TESTS:
11-10-93	11-10-93

RATING: S= Site suitable for system U= Site unsuitable for system

CONVENTIONAL:	MOUND:	IN-GROUND-PRESSURE:	SYSTEM-IN-FILL	HOLDING TANK:	RECOMMENDED SYSTEM:(optional)
☒S ☐U	☒S ☐U	☒S ☐U	☒S ☐U	☒S ☒U	CONV.

If Percolation Tests are NOT required under s. ILHR 83.09(5)(b), indicate:	DESIGN RATE: .425

If any portion of the tested area is in the Floodplain, indicate Floodplain elevation:	NA

PROFILE DESCRIPTIONS

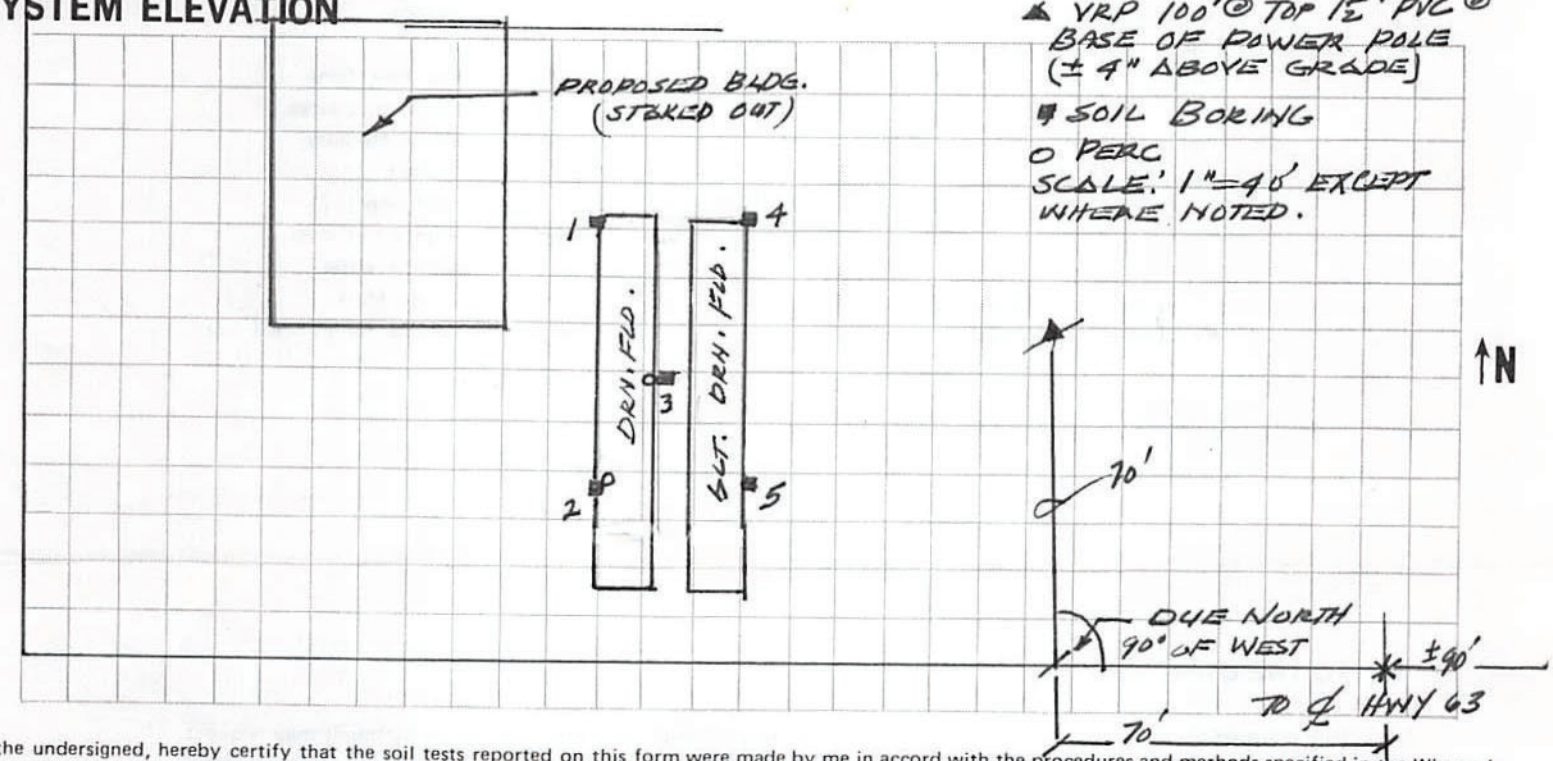
BORING NUMBER	TOTAL DEPTH IN.	ELEVATION	DEPTH TO GROUNDWATER-INCHES OBSERVED	DEPTH TO GROUNDWATER-INCHES EST. HIGHEST	CHARACTER OF SOIL WITH THICKNESS, COLOR, TEXTURE, AND DEPTH TO BEDROCK IF OBSERVED (SEE ABBRV. ON BACK.)
B- 1	78	106.70'	No	>78	0-6 Bl/sl, 6-17 Bn/s, 17-40 Bn fs, 40-62 Light Bn f-med.s, 62-68 Bn med.s, cob., 68-78 Bn med.s.
B- 2	78	105.95'		"	0-6 Bl/sl, 6-20 Bn/s, 20-38 Bn fs, 38-78 Light Bn f-med.s
B- 3	72	104.95'		>72	0-6 Bl/sl, 6-20 Bn/s, 20-35 Bn fs, 35-72 Light Bn f-med.s
B- 4	〃	104.50'		〃	0-5 Bl/sl, 5-18 Bn/s, 18-37 Bn fs - 37-43 Bn med.s, 43-72 Light Bn f-med.s
B- 5	〃	103.75'		〃	0-6 Bl/sl, 6-20 Bn/s, 20-38 Bn fs, 38-48 Light Bn f-med.s, 48-72 Bn med.s
B-					

PERCOLATION TESTS

TEST NUMBER	DEPTH INCHES	WATER IN HOLE AFTER SWELLING	TEST TIME INTERVAL-MIN.	DROP IN WATER LEVEL-INCHES PERIOD 1	PERIOD 2	PERIOD 3	RATE MINUTES PER INCH
P. 1	41	NO	2	4	4	—	4/
P. 2	32	〃	10	5.5	5.5	—	1.82
P. 3	20	〃	10	5.125	4.75	4.75	2.11
P-							
P-							
P-							

PLOT PLAN: Show locations of percolation tests, soil borings and the dimensions of suitable soil areas. Indicate scale or distances. Describe what are the horizontal and vertical elevation reference points and show their location on the plot plan. Show the surface elevation at all borings and the direction and percent of land slope.

SYSTEM ELEVATION



I, the undersigned, hereby certify that the soil tests reported on this form were made by me in accord with the procedures and methods specified in the Wisconsin Administrative Code, and that the data recorded and the location of the tests are correct to the best of my knowledge and belief.

NAME (print):	TESTS WERE COMPLETED ON:

1. Complete legal description;
2. The use section must clearly indicate whether this is a residence or commercial project;
3. MAXIMUM number of bedrooms or commercial use planned;
4. Is this a new or replacement system;
5. Complete the suitability rating boxes. A SITE IS SUITABLE FOR A HOLDING TANK ONLY IF ALL OTHER SYSTEMS ARE RULED OUT BASED ON SOIL CONDITIONS;
6. PLEASE use the abbreviations shown here for writing profile descriptions and completing the plot plan;
7. MAKE A LEGIBLE diagram accurately locating your test locations. Drawing scale is prefered. A separate sheet may be used if desired;
8. Make sure your benchmark and vertical elevation reference point are clearly shown, and are permanent;
9. Complete all apropriate boxes as to dates, names, addresses, flood plain data, percolation test exemption, if appropriate;
10. If the information (such as flood plain, elevation) does not apply, place N.A. in the appropriate box;
11. Sign the form and place your current address and yur certification number;
12. Make legible copies and distribute as required. ALL SOIL TESTS MUST BE FILED WITH THE LOCAL AUTHORITY WITHIN 30 DAYS OF COMPLETION.

ABBREVIATIONS FOR CERTIFIED SOIL TESTERS

Soil Separates and Textures

st — Stone (over 10")
cob — Cobble (3 - 10")
gr — Gravel (under 3")
*s — Sand
cs — Coarse Sand
meds — Medium Sand
fs — Fine Sand
ls — Loamy Sand
*sl — Loamy Sand
*l — Loam
*sil — Silt Loam
si — Slit
cl — Clay Loam
scl — Sandy Clay Loam
sicl — Silty Clay Loam
sc — Sandy Clay
sic — Silty Clay
*c — Clay
pt — Peat
m — Muck

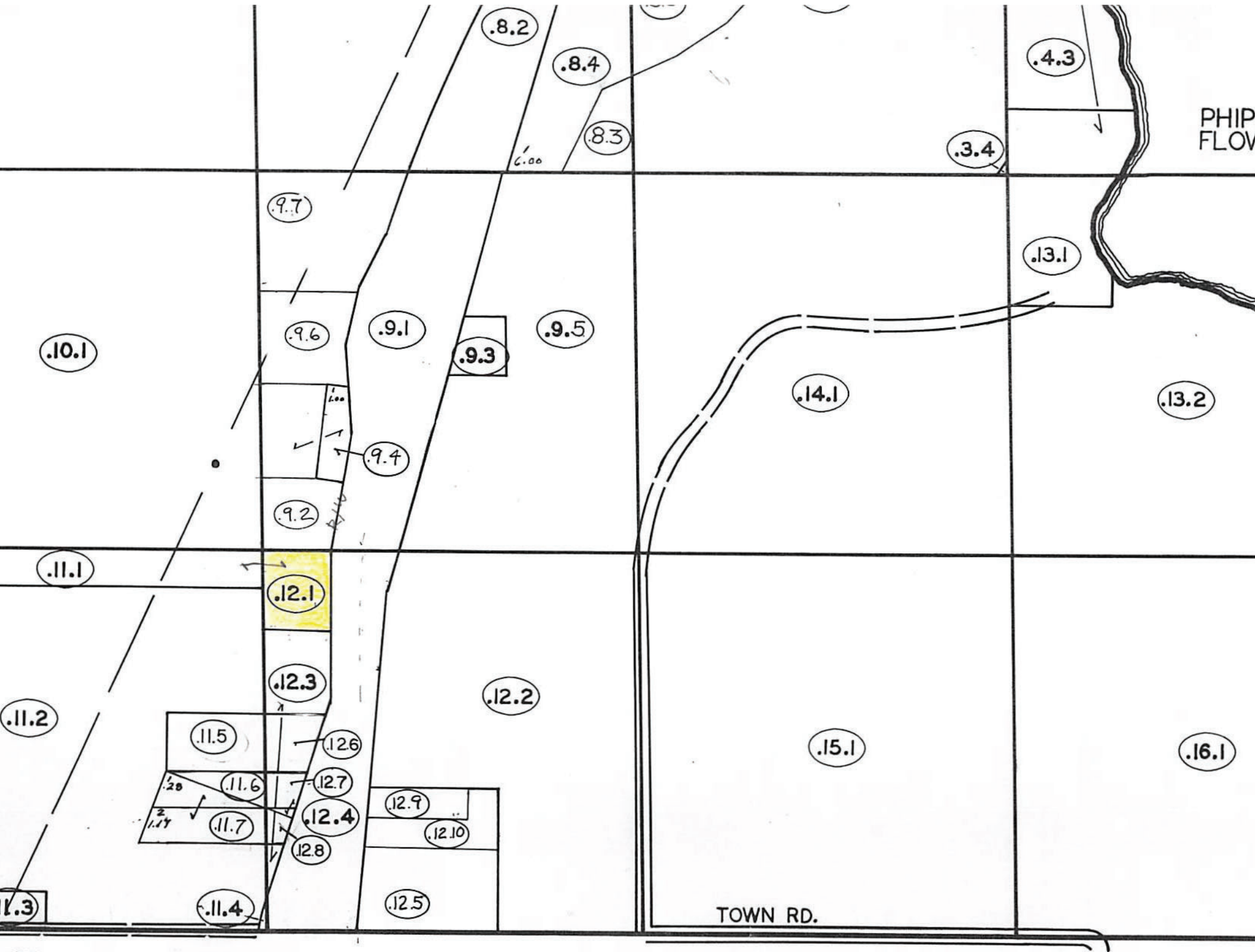
* Six general soil textures for liquid waste disposal

Other Symbols

BR — Bedrock
SS — Standstone
LS — Limestone
HGW — High Groundwater
Perc — Precolation Rate
W — Well
Bldg — Building
> — Greater Than
< — Less Than
Bn — Brown
Bl — Black
Gy — Gray
Y — Yellow
R — Red
mot — Mottles
w/ — with
fff — few, fine, faint
cc — common, coarse
mm — Many, Medium
d — distinct
p — prominent
HWL — High water level, surface water
BM — Bench Mark
VRP — Vertical Reference Point

TO THE OWNER:

This soil test report is the first step in securing a sanitary permit. The county or the Department may request verification of this soil test in the field prior to permit issuance. A complete set of plans for the private sewage system and a permit application must be submitted to the appropriate local authority in order to obtain a permit. The sanitary permit must be obtained and posted prior to the start of any construction.



REF : AERIAL PHOTO D4

Well Construction Report
WISCONSIN UNIQUE WELL NUMBER HT843

Drinking Water and Groundwater - DG/5
Department of Natural Resources, Box 7921
Madison WI 53707

Form 3300-077A

Property Owner: BURMEISTER, JIM			Phone #: (715)634-2809
Mailing Address: RT 6			
City: HAYWARD	State: WI	Zip Code: 54843	
County: Sawyer	Co. Permit #:	Notification #:	Completed: 06-14-1994

Well Constructor (Business Name): THOMAS G BUTTERFIELD	Lic. #: 555	Facility ID # (Public Wells):	
Address: RT 1 BOX 1086 HAYWARD WI 54843-9790		Well Plan Approval #:	
		Approval Date (mm-dd-yyyy):	
Hicap Permanent Well #:	Common Well #:	Specific Capacity: 7	

3. Well serves 1 # of
Private,potable
Heat Exchange____# of drillholes

Hicap Well ? No
Hicap Property ? No
Hicap Potable ?

1. Well Location
Town of LENROOT

Fire # (if avail.):

Street Address or Road Name and Number: HWY 63N

Subdivision Name:	Lot #:	Block #:

Latitude / Longitude in Decimal Degree (DD): °N °W				Method Code: GPS008
SW SW or Govt Lot #	Section: 1	Township: 41 N	Range: 9 W	

2. Well Type New Well
of previous unique well # constructed in

Reason for replaced or reconstructed well ?

Construction Type: Drilled

4. Potential Contamination Sources - ON REVERSE SIDE

5. Drillhole Dimensions and Construction Method

Upper Enlarged Drillhole / Lower Open Bedrock

- Rotary - Mud Circulation .....
- Rotary - Air .....
- Rotary - Air & Foam .....
- Drill-Through Casing Hammer
- Reverse Rotary
- Cable-tool Bit ____in. dia...
- Dual Rotary .....
- Temp. Outer Casing ____in. dia

6. Casing, Liner, Screen — Removed? ____depth ft. (If NO explain on back side)

Dia. (in.)	Material, Weight, Specification Manufacturer & Method of Assembly	From (ft.)	To (ft.)
4	NEW P @ E BLK WELDED ASTM A 53B 10.79 LB PER FTSAWHILL	Surface	38
Dia. (in.)	**Screen type, material & slot size**	**From (ft.)**	**To (ft.)**
4	25 SLOT STAINLESS STEEL	38	41

7. Grout or Other Sealing Material
Method

8. Geology

Geology Codes				8. Geology Type, Caving/Noncaving, Color, Hardness, etc...	From (ft.)	To (ft.)
T		Y	G	MED BRN SAND @ GRAVEL W/ROCKS	Surface	25
T		Y	M	MED BRN SILTY SAND @GRAVEL	25	35
T		Y		MED BRN LESS SILTY SAND @ GRAVEL	35	41

9. Static Water Level
15 ft. below ground surface

10. Pump Test
Pumping level 17 ft. below surface
Pumping at 14 GP M for 2 Hrs.
Pumping Method ?

11. Well Is
14 in. above grade
Developed ? Yes
Disinfected ? Yes
Capped ? Yes

12. Notified Owner of need to fill & seal ?

Filled & Sealed Well(s) as needed? No
NEW HOUSE

13. Constructor / Supervisory Driller	Lic #	Date Signed
TB		06-15-1994
Drill Rig Operator	**Lic or Reg #**	**Date Signed**
MB		06-15-1994

4a. Potential Contamination Sources Is the well located in floodplain ? No

Type	Qualifier	Distance
Building Overhang		12

Comment:

Water Quality Text:

Water Quantity Text:

Difficulty Text:

Created On: 11-03-1994 Created by: HFRC LOAD Updated On: 11-03-1994 Updated by: MIGRATION