

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

This Application has been Signed and Submitted by: i:0#.f|wamsmembership|jeffstelzer signed on 2023-06-29T09:16:35

Site or Project Name:

Phantom Lakes Harvesting

The permit application will be saved automatically with this name

Activity:

Mechanical Control Application

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

Permit ID #:

SE-2019-68-5219M

Please Select One:

- New application
 Pay Renewal Fee

Permit Name:

Phantom Lakes

Waterbody Name:

Upper & Lower Phantom Lakes

Permit Holder Name:

Phantom Lakes Management District

Permit Import Successful – Please Proceed to Contacts Tab

3200-113 Mechanical - Manual Plant Control Application

- Complete all applicable forms
- Attach a water body map that shows the harvest location(s), harvest dimensions and riparian landowners.
- Certify that a copy of the application has been provided to any affected property owner's association/district and to landowners adjacent to treatment area.
- Pay fee online.
- Sign and Submit form.

Contact Information

Applicant Information

Organization Phantom Lake Management District

Last Name:

First Name:

Mailing Address: PO Box 391

City: Mukwonago

State: WI

Zip Code: 53149

Email:

Phone Number:

(xxx-xxx-xxxx)

Alternative Phone Number:

(xxx-xxx-xxxx)

Waterbody Address

Last Name:

First Name:

Street Address: Wahl Ave.

City: Mukwonago

State: WI

Zip Code: 53149

Email:

Phone Number:

(xxx-xxx-xxxx)

Alternative Phone Number:

(xxx-xxx-xxxx)

Removal Firm Information

Name of Firm: Phantom Lakes Management District

Address: PO Box 391

City: Mukwonago

State: WI

Zip: 53149

Email: gonefishing@phantomlakes.us

Phone Number: 262-414-1475

(xxx-xxx-xxxx)

Adjacent Riparian Property Owners or Other Individuals Sponsoring Removal

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

Uploaded riparian owners to attachment tab

Name

Address

Phone

Email Address

Site Information - Complete**Waterbody Containing Control Area(s)****Waterbody Property Owners Association
or Waterbody District Representative :** None**Water Body Name:****Primary County:****Latitude:****Longitude:****Section:****Township:****Range:****Direction:** E W**Waterbody Surface Area:**

acres

Estimated Surface area that is 10ft or less

acres

Proposed Control Area(s)Length of project area ft. x Shoreline or area width ft. /43,560= Estimated Acreage Avg. Depth ft.

TOTAL ESTIMATED ACREAGE 64.77

Aquatic Plant Control Mechanical / Manual Permit Application

Form 3200-113 (R 10/16)

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? <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Don't Know	If Yes, date approved of most current copy 4/17/2023	Link to Approved Plan: <input type="text"/> <input checked="" type="checkbox"/> Uploaded Plan copy as an Attachment
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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 Robert's Nursery Site	1/4 1/4 SW	1/4 SE	Section 02	Township 04 N	Range 18	<input checked="" type="radio"/> E <input type="radio"/> W	County Walworth
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 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 VI: Reasons for Aquatic Plant Removal

Purpose of Aquatic Plant Removal: <input checked="" type="checkbox"/> Maintain navigational channel for common use <input checked="" type="checkbox"/> Maintain private boat access <input checked="" type="checkbox"/> Maintain private access for fishing <input checked="" type="checkbox"/> Improve Swimming <input type="checkbox"/> Other _____	Nuisance Caused By: <input checked="" type="checkbox"/> Emergent water plants <input checked="" type="checkbox"/> Submergent water plants <input checked="" type="checkbox"/> Floating water plants <input type="checkbox"/> Other _____
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Name of plants, if known
 Too many to name here...see 2023 APM Plan

Section VII: Integrated Pest Management (Alternatives Considered)

	A. Previously Done?	B. Presently Proposed?
1. Chemical	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No
2. Dredging	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No

- 3. Drawdown Yes No Yes No
- 4. Nutrient controls in watershed Yes No Yes No
- 5. Nutrient controls on property Yes No Yes No
- 6. Other Yes No Yes 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	Last treatment was prior to 1975. Results unknown.
2. Dredging	n/a
3. Drawdown	n/a
4. Nutrient controls in watershed	n/a
5. Nutrient controls on property	n/a
6. Other	

Required Attachments and Supplemental Information

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="text" value="File Attachment"/>	PLMD Mailing List.pdf
Site Map	<input type="text" value="File Attachment"/>	Lower Phantom Lake 2023-2027 Harvesting Map.jpg
Site Map	<input type="text" value="File Attachment"/>	Upper Phantom Lake 2023-2027 Harvesting Map.jpg
Site Map	<input type="text" value="File Attachment"/>	Phantom Lake Disposal Site.jpg
Lake Management Plan	<input type="text" value="File Attachment"/>	Phantom Lake 2023 APM Plan Update - DRAFT.pdf

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:	64.77
Acreage Fee:	\$300
Total Fee:	\$300

Payment Information

Invoice Number: WP-00041931
Payment Confirmation Number: WS2WT3010326739
Amount Paid: \$300

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.
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

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:0#.f|wamsmembership|jeffstelzer signed on 2023-

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.