State of Wisconsin Department of Natural Resources PO Box 7921, Madison WI 53707-7921

Owner Approval Letter (Mains Only)

Chemical Addition Checklist

Water System Approval Request Form 3300-260 (R 4/03)

Notice: This form is authorized by ss. 281.11, 281.19(1) and (2) and 280.11, Wis. Stats., and ss. NR 108.04(2)(a) and NR 811.13(1)(h)(3), Wis. Adm. Code. Completion of this form or a similar form approved by the Department is mandatory. Failure to submit a completed form to the Department is punishable: by a forfeiture of not less than \$10 nor more than \$5,000; or by a fine of not less than \$10 or more than \$100 or imprisonment of not more than 30 days, or both. Each day of continued violation is a separate offense (ss. 299.97 and 280.97, Wis. Stats.). Personally identifiable information on this form will be used for no other purpose.

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System Information						
Water System Name			Water System Owner Name (if different than Water System Name) Water System Contact (examples: operator, water superintendent) Name			
Water System Representative (examples: clerk, sanitary dis	strict president)					
Name						
Street Address			Street Address			
City	State	ZIP Code	City	State ZIP	Code	
Telephone Number	Fax Number	T	Telephone Number	Fax Number		
E-Mail Address			E-Mail Address	E-Mail Address		
Designer Information						
Project Designer Name			Firm Name			
Street Address			Telephone Number	Fax Number		
City	State	ZIP Code	E-Mail Address			
Project Information						
Designer's Project Identification Number			Latest Revision Date			
Brief Project Description:			I			
the village better flow needs on the existing	w to the North g tower lead t	and provide so the South.	ting water main just No some security/redundar ame the tower is drawn	ncy in case of main	tenance	
Items Enclosed and Numb	per of Copies					
<u>Item</u>	<u>N</u>	o. of Copies	<u>Item</u>		No. of Copies	
Plans			Well Pump	Checklist		
Specifications			Water Mair	Extension Checklist		
Engineering Report			☐ Wellhead F	Protection Plans		