

Parcel Number: _____

Temporary Holding Tank Maintenance Agreement

Property Owner(s): _____

Mailing Address: _____

Site Address if Different: _____

Location: _____ ¼, _____ ¼, Sec. _____, T _____ N, R _____ E or W

Lot: ____ Blk: ____ CSM: ____ Subdivision: ____ Vol: ____ Pg: ____ or,

on a separate sheet, provide description if less than a forty acre parcel

Return Recorded Document To:
Richland County Zoning Office

The Private Onsite Wastewater Treatment System (POWTS) on the subject property has been permitted under SP# _____, and is being installed and maintained according to Comm 83, WI Admin. Code, the Holding Tank Component Manual for POWTS (SBC-10571-P, June 11, 1999), and the Richland County POWTS Ordinance.

1. This POWTS has been designed to accommodate an estimated daily flow of _____ gallons of domestic wastewater per day.
2. The above named property will use the designed septic tank as a temporary holding tank due to wet soil conditions.
3. Each time the wastewater in the tank reaches 90% of the tank(s) capacity or a level of 12" below the inlet (at which time the alarm will activate), a pumper must be called to empty the tank contents and dispose of them in accordance with NR 113, WI Admin. Code. At each pumping the pumper should visually inspect the condition of the tank, risers and manhole cover(s) and verify that any required locks are present.
4. The owner may not remove any of the wastes from the holding tanks, or cause such wastes to be removed by any person not authorized to do so under Chapter NR 113. The discharge of wastes from this holding tank to the ground surface, including intentional discharges and discharges caused by neglect, constitutes a failing POWTS and may result in issuance of correction orders by the county.
5. Anytime a defect is identified or malfunction occurs, it shall be reported to the person(s) identified as the service provider below for this POWTS. Repair or correction of such failure or malfunction shall comply with Comm 83, WI Admin. Code and the Richland County POWTS Ordinance.
6. No one should enter a holding tank for any reason without being in full compliance with OSHA standards for entering a confined space. The atmosphere within these tanks may contain lethal gasses, and rescue of a person from the interior of the tank may be difficult or impossible.
7. In the event this POWTS fails and cannot be repaired, a code-compliant replacement holding tank may be installed in the same location (a new sanitary permit is required for such a replacement).
8. If this POWTS is replaced, or its use discontinued, it shall be abandoned in accordance with Comm 83.33, WI Admin. Code.
9. I (we) further agree that this agreement is binding on future owners, heirs and assignees of this property.
10. State approved _____ system must be installed by _____ weather permitting.
11. In the event there is a problem with this POWTS, the following persons should be contacted:

Installer: _____

Service Provider: _____

Richland County Sanitation Department, 181 W. Seminary St., Room 309, Richland Center, WI 53581
608-647-2447; fax: 608-647-6134; e-mail: pedleyh@co.richland.wi.us

Owner(s) Names – please print	Subscribed and sworn to before me on this date: Notary Public
Authorized Owner(s) signature	My Commission Expires:

Complete this form and submit the original, along with an \$11 check made payable to: Register of Deeds, 181 West Seminary Street, Richland Center, WI 53581 Additional sheets: \$2.00 each Drafted by: _____