

Chemical Aquatic Plant Control Application and Permit Wisconsin Pollutant Discharge Elimination System (WPC) Pesticide Pollutant Permit Application

Form 3200-004 (R 03/13)

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.].

DNR Use Only	
ID Number	Permit Expiration Date
Waterbody #	Fee Received

Section I – Applicant Information – Name of Permit Applicant. Also indicate names and addresses of all individuals, associations, communities or town sanitary districts sponsoring treatment. Attach additional sheets if necessary.

Home Address	Name Waterford Waterway Management District Street Address 415 North Milwaukee Street City Waterford State WI ZIP Code 53185	Lake Address	Name Waterford Waterway Management District Street Address 415 North Milwaukee Street City Waterford State WI ZIP Code 53185
Phone Number (include area code) Primary: (312) 952-1959 Secondary:		Email Address mikcwaghorn@yahoo.com	

Section II – Aquatic Plant Control Location

Waterbody to be Treated (waterbody where treatment area is located) Tichigan Lake / Waterford Waterway				Lake Surface Area 1132 acres	Estimated Surface Area that is 10 Feet or Less in Depth 900 acres
County Racine	Section 23	Township 04 N	Range 19	<input checked="" type="checkbox"/> E <input type="checkbox"/> W Name of Applicator or Firm Stantec, Inc. Street or Route 209 Commerce Parkway, PO Box 128 City Cottage Grove State WI ZIP Code 53527	
Is the waterbody a private pond? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				City Cottage Grove State WI ZIP Code 53527	
Does the waterbody have public access? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				County Dane Phone Number (include area code) (715) 781-9976	
Adjacent Riparian Property Owner Names (attach sheets if necessary)				Email Address mark.kordus@stantec.com	
1. <u>see attached sheet(s)</u>				Applicator Certification Number for Category 5 Aquatic Pesticide Application 077803	
2. _____				Business Location License Number (if applicable) 93-020291-011079	
3. _____				Restricted Use Pesticide License Number (if applicable)	
4. _____				Name of Lake Property Owners' Association Representative or Lake District Representative (if none, please indicate) Mike Waghorn	
5. _____					
6. _____					
7. _____					

Area(s) Proposed for Control: (Note details in permit cover letter for final permitted sizes of treatment areas.)

Treatment Length	Treatment Width	Estimated Acreage	Average Depth	Total Estimated Acreage
A. <u>EWM</u> ft. X <u>see map</u> ft. + 43,560 ft. ² =	<u>50</u>	<u>3</u> ft.		
B. <u>CLP</u> ft. X <u>see map</u> ft. + 43,560 ft. ² =	<u>50</u>	<u>3</u> ft.	Total from lines A - E	<u>125</u>
C. <u>Navigational</u> ft. X <u>see map</u> ft. + 43,560 ft. ² =	<u>25</u>	<u>3</u> ft.	Total from Attached Sheets	
D. _____ ft. X _____ ft. + 43,560 ft. ² =				
E. _____ ft. X _____ ft. + 43,560 ft. ² =			Grand Total	<u>125</u>

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 complete and attach Form 3200-004A, Large-Scale Treatment Worksheet. Private pond treatments are exempted from this requirement.

Is this area within or adjacent to a sensitive area designated by the Department of Natural Resources? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	DNR Use: NHI Review? <input type="checkbox"/> Yes <input type="checkbox"/> No Describe:
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Section III – Fees

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.

4. Fee calculations:

Basic Permit Fee (non-refundable) \$ 20.00

If proposed treatment is over 0.25 acre, calculate acreage fee:
(round up to nearest whole acre, to maximum of 50 acres.)

125 acres X \$25 per acre = \$ 1250

If proposed treatment is ≤ 0.25 acre, acreage fee is \$0.

Enter Acreage Fee (from above) 1250

Total Fee Enclosed \$ 1270

Site Map: Attach a sketch or a printed map of lake indicating area and dimensions of each individual area where plant control is desired and flow of surface water outside treatment area. Also show location of property owners riparian to and adjacent to the treatment area. Attach a separate list of owners and corresponding treatment dimensions coded to the lake map, if necessary.

Section IV – Reasons for Aquatic Plant Control

Is this permit being requested in accordance with an approved Aquatic Plant Management Plan? Yes No

Treatment Type: Lake Pond Wetland Marina Other

<p>Goal of Aquatic Plant Control:</p> <p><input type="checkbox"/> Reduce nuisance algae accumulation</p> <p><input checked="" type="checkbox"/> Maintain navigational channel for common use</p> <p><input checked="" type="checkbox"/> Maintain private access for boating</p> <p><input type="checkbox"/> Maintain private access for fishing</p> <p><input type="checkbox"/> Improve swimming</p> <p><input type="checkbox"/> Control of purple loosestrife</p> <p><input checked="" type="checkbox"/> Control of invasive exotics</p> <p><input type="checkbox"/> Other: _____</p>	<p>Nuisance Caused By:</p> <p><input type="checkbox"/> Algae</p> <p><input type="checkbox"/> Emergent water plants (majority of leaves and stems growing above water surface, e.g. cattails, bulrushes)</p> <p><input type="checkbox"/> Floating water plants (majority of leaves floating on water surface, e.g., waterlilies, duckweed)</p> <p><input checked="" type="checkbox"/> Submerged water plants (leaves and stems below water surface, flowering parts may be exposed, e.g., milfoil, coontail)</p> <p><input type="checkbox"/> Other: _____</p>
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List Target Plants

Note: Different plants require different chemicals for effective treatment. Do not purchase chemical before identifying plants.

Eurasian water-milfoil & curly-leaf pondweed - early-season AIS treatment
Coontail, clodea, & white water lily - mid/late season navigational nuisance/access treatments

Section V – Chemical Control

Alternatives to Chemical Control:	Feasible?	If No, Why Not?
1. Mechanical harvesting	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<u>Spreads plant debris</u>
2. Hand pulling	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<u>Too large an area</u>
3. Hand raking	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<u>Too large an area</u>
4. Hand cutting	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<u>Too large an area</u>
5. Sediment screens/covers	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<u>other potential ecological system damage</u>
6. Dredging	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<u>too costly</u>
7. Lake drawdown	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<u>no ability to drawdown</u>
8. Nutrient controls in watershed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<u>not a control option for immediate concerns</u>
9. 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.
If you checked yes to any of the alternatives listed above, please explain your decision to use chemical controls:

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Section V – Chemical Control (continued)

Trade Name of Proposed Chemical(s)

EWM: DMA-4 (liquid 2,4-d) @ 6.5 gal/acre or 3.0 PPM

CLP: Aquathol K (liquid endothall) @ 4.0 gal/acre or 2.0 PPM

1st choice - Submergent Navigational: Mix of Clipper @ 2.1 lbs/acre & Tribune 1 gal. and Captain/Cutrine 1 gal. per/acre (~20 acre

2nd choice - Submergent Navigational: Mix of Tribune (diquat) 2.0 gal and Captain/Cutrine 3.0 gal @ a 2:3 gal/acre ratio (~20 acre

Floating-leaf Navigational: Habitat+surfactant @ 3pts/acre (~5 acres)

A pre-treatment survey will take place to determine final treatment areas, to be confirmed with Craig Helker

Method of Application: _____

Will surface water outflow and/or overflow be controlled to prevent chemical loss? Yes No

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

What were the results of the treatment?

All have been used in the past successfully on Tichigan Lake, in particular the Clipper slurry mix was very successful in season long navigational control verses multiple treatments in the diquat only areas.

Overlapping areas of EWM & CLP will be treated with a 2,4-D/endothall mix at above rate. ALL AIS management areas will be verified & mapped prior to application. Total acreages included herein are estimates.

Note: Chemical fact sheets for aquatic pesticides used in Wisconsin are available from the Department of Natural Resources upon request.

Section VI – 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 plan 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 has provided 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.

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 application have been provided to the appropriate parties named in Section II and that the conditions of the permit and pesticide use will be adhered to.


Signature of Applicant

3/25/15
Date Signed

All portions of this permit, map and accompanying cover letter must be in possession of the chemical applicator at time of treatment. In addition, all provisions of Chapter NR 107, specifically ss. NR 107.07 and NR 107.08, Wis. Adm. Code, must be complied with, as well as any other applicable laws and regulations.

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Section VII – WPDES Permit Request

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

- No: Already have WPDES coverage until Sept. 2016 Yes – complete section VII with signature
 WPDES coverage not needed

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

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

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

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

I hereby certify that I am the authorized representative (as specified in Ch. NR 205.07(1)(g), Wis. Adm. Code) of the pest treatment activity which is the subject of this permit application. I certify that the information contained in this form and attachments is, to the best of my knowledge, true, accurate and complete.

Signature of Authorized Representative

Printed Name

Date Signed

Section VIII – Permit to Carry Out Chemical Treatment (Leave Blank – DNR Use Only)

The foregoing application is approved. Permission is hereby granted to the applicant to chemically treat the waters described in the application during the season of 20____.

Application fee received?

- Yes No

State of Wisconsin
Department of Natural Resources
For the Secretary

Advance notification of treatment required?

- Yes No

By _____

Regional Director or Designee

Date Signed

Date Mailed

Please Note:

If you believe that you have a right to challenge this decision, you should know that Wisconsin statutes and administrative rules establish time periods within which requests to review Department decisions must be filed.

For judicial review of a decision pursuant to ss. 227.52 and 227.53, Wis. Stats., you have 30 days after the decision is mailed or otherwise served by the Department, to file your petition with the appropriate circuit court and serve the petition on the Department. Such a petition for judicial review shall name the Department of Natural Resources as the respondent.

This notice is provided pursuant to s. 227.48(2), Wis. Stats.

To request a contested case hearing pursuant to s. 227.42, Wis. Stats., you have 30 days after the decision is mailed, or otherwise served by the Department, to serve a petition for hearing on the Secretary of the Department of Natural Resources. The filing of a request for a contested case hearing is not a prerequisite for judicial review and does not extend the 30-day period for filing a petition

NOTE: Completion of this form is required by the Department, pursuant to s. 144.025(2)(i), Wis. Stats., and Chapter NR 107, Wis. Adm. Code, once every five years for proposed treatments that would cover more than 10 acres on one lake, or more than 10 percent of that portion of the lake that is 10 feet or less in depth.

The purpose of this form is to identify the: (1) recreational needs of the property owners and visitors;
(2) value of the proposed treatment area to fish and wildlife;
(3) cause(s) of the excess plant growth problem; and
(4) short and long-term solutions to the problem.

Please furnish a detailed map(s) of the lake and its watershed. Indicate the watershed boundaries on the map. If you do not have a watershed map for the lake you wish to treat, your DNR lake management coordinator can help you locate or prepare one.

SECTION I. BACKGROUND

Name of Applicant Waterford Waterway Management District	Date Completed 03/12/2015
Name of Lake Tichigan Lake and the Fox River system	

SECTION II. RECREATIONAL USES

Check those uses that apply and complete the information requested:

- 1. **SWIMMING:** Indicate on your lake map the portions of the proposed treatment area that are used for swimming.
What distance from shore is needed to provide adequate swimming space? lake-wide feet
What is the average depth at this distance? lake-wide feet
- 2. **FISHING:** Indicate on your lake map any fishing areas that are within the proposed treatment area.
- 3. **HUNTING:** Indicate on your lake map any hunting areas that are within or adjacent to the proposed treatment area.
- 4. **BOATING/NAVIGATION:** Indicate on your lake map where the following boating activities take place within the proposed treatment area:
Sailing Water skiing Fishing
Pleasure boating Jet skiing Other _____
- 5. **AESTHETIC:** Indicate on your lake map any wildlife or nature observation areas within the proposed treatment area.
Do you object to the aesthetic quality (appearance, odor) of the proposed treatment area? Yes No
- 6. **OTHER:** What other activities occur in the proposed treatment area? the entire lake is used for fishing, boating and swimming

SECTION III. FISH AND WILDLIFE VALUE

- 1. **Fisheries:** To maintain a quality fishery, a lake must provide good spawning, rearing and feeding habitat. Please indicate on your lake map the location of any quality fisheries habitat. (Contact your local DNR fish manager or your local fishing club for information about your lake's fishery.)
- 2. **Wildlife:** Indicate on your lake map any portions of the proposed treatment area or adjacent shoreline that are considered to be good wildlife habitat. (Contact your local DNR wildlife manager or your local wildlife or hunting club for additional information about the wildlife around (and in) your lake.)
- 3. Which organization(s) or individual(s) did you contact for your information? _____

SECTION IV. CAUSES OF THE PROBLEM

What are perceived to be the local or regional causes of the problem? (Check all those that apply.)

- A. Agricultural runoff (from barnyards or croplands) that contributes sediment, nutrients and/or bacteria to the lake.
- B. Urban runoff (from stormwater) that contributes sediment, nutrients and other pollutants to the lake.
- C. Sewage treatment or industrial discharges upstream of the lake.
- D. Possible faulty septic systems in the area around the lake.
- E. Runoff from fertilized lawns near the lake.
- F. Sediments contaminated with nutrients from past pollution activities.
- G. Naturally fertile - no known human sources of excessive sediment, nutrients or other pollutants.
- _____ Exotic species introduced to the lake.

SECTION V. SOLUTIONS

Control of aquatic plant problems can be temporarily accomplished with short-term measures, but no strategy will be successful without long-term planning to address the source of the problem. A sound plant management program should combine both short-term and long-term control strategies.

1. What level of short-term control do you wish to achieve?

- Remove 100% of the plants in the treatment area.
- Remove 70-99% of the plants in the treatment area.
- Remove less than 70% of the plants in the treatment area.

2. Which plants do you wish to remove in the short-term?

- Remove all plant species.
- Remove specific plant species only. (Name(s) of species: EWM & CLP, and nuisance species for navigation)

3. How often will it be necessary to:

- A. Chemically treat? 0 times per year for algae; up to 4 times per year for other plants
- B. Mechanically harvest? 0 times per year

4. What long-term control alternatives have you begun to implement?

- Developed a lake plant management plan.
- Developed a lake protection plan.
- Formed a Lake District, Lake Association or other organization. (Name: Waterford Waterway Management District)
- Established a monitoring program for the lake.
- Contacted the Soil Conservation Service or Land Conservation Commission to identify land use controls that are needed in the watershed.
- Conducted a septic survey with the county sanitarian.
- Other: Received AIS grant funding for EWM & CLP management

Long-term planning can provide an organized approach to solving the problems that are affecting the water quality of your lake. Your DNR lake management coordinator, county extension agent, or regional planning commission can provide specific technical information and assistance.

SECTION VI. PUBLIC INVOLVEMENT

1. Before you conduct a large-scale chemical aquatic plant treatment, you are required to provide the public with formal notice of the planned treatment (s. NR 107.04(3), Wis. Adm. Code). Please attach evidence (e.g., newspaper clipping) that such notice has been made.

2. You are also required to conduct a public informational meeting on the proposed large-scale treatment if 5 or more individuals, organizations or local or special units of government request such a meeting within 5 days of the notice (s. NR 107.04(3), Wis. Adm. Code).

Was a public informational meeting required for the proposed treatment? Yes No

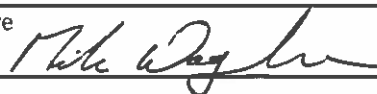
If yes, please attach evidence that such a meeting was held.

3. These public notice and public meeting provisions apply each year that a treatment is proposed.

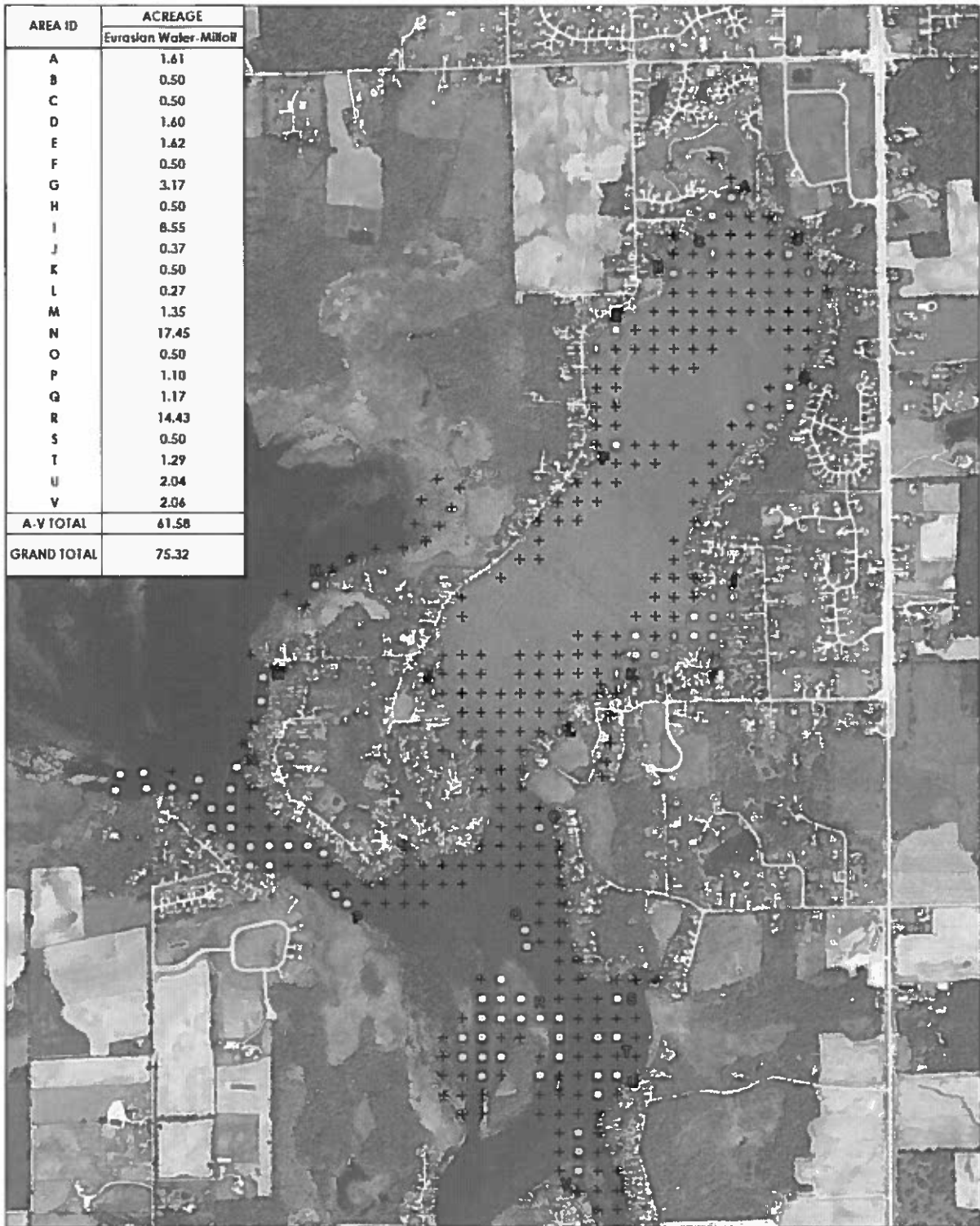
NOTE: This form is to be updated once every 5 years to include new information. Modifications of the proposed treatment within the 5-year period also require re-submittal of this form if the location or target organisms are changed, or if the treatment area is expanded by more than 10 percent.

I hereby certify that the above information is true and correct and that copies of this application have been provided to the appropriate parties named in Section II of Form 3200-4, Application for Permit for Chemical Aquatic Plant Control.

Applicant's Signature



AREA ID	ACREAGE
	Eurasian Water-Milfoil
A	1.61
B	0.50
C	0.50
D	1.60
E	1.62
F	0.50
G	3.17
H	0.50
I	8.55
J	0.37
K	0.50
L	0.27
M	1.35
N	17.45
O	0.50
P	1.10
Q	1.17
R	14.43
S	0.50
T	1.29
U	2.04
V	2.06
A-V TOTAL	61.58
GRAND TOTAL	75.32



Notes
 1. Coordinate System: NAD 1983 StatePlane Wisconsin South FIPS 8003 feet
 2. Data Sources include: Starline
 3. Orthophotography: 2013 NAD

- Legend**
- + GPS Sample Points*
 - o Eurasian Water-Milfoil (Rake fullness of 1 only)
 - o Eurasian Water-Milfoil (Rake head is about half full)
 - o Eurasian Water-Milfoil /Curly-leaf Pondweed
 - Aquatic Invasive Plant Area

System Rating	Coverage	Description
1		Little to no stems. There are not enough plants to evenly cover the length of the rake head in a single row
2		There are enough plants to cover the length of the rake head as a single row, but not enough to fill in the gaps
3		There are enough plants to completely cover and there are no visible

Figure No. **1** **DRAFT**

**Tichigan Lake
 2014 Post Treatment Survey
 Eurasian Water-Milfoil**

Client/Project
 Waterford Waterway
 Management District

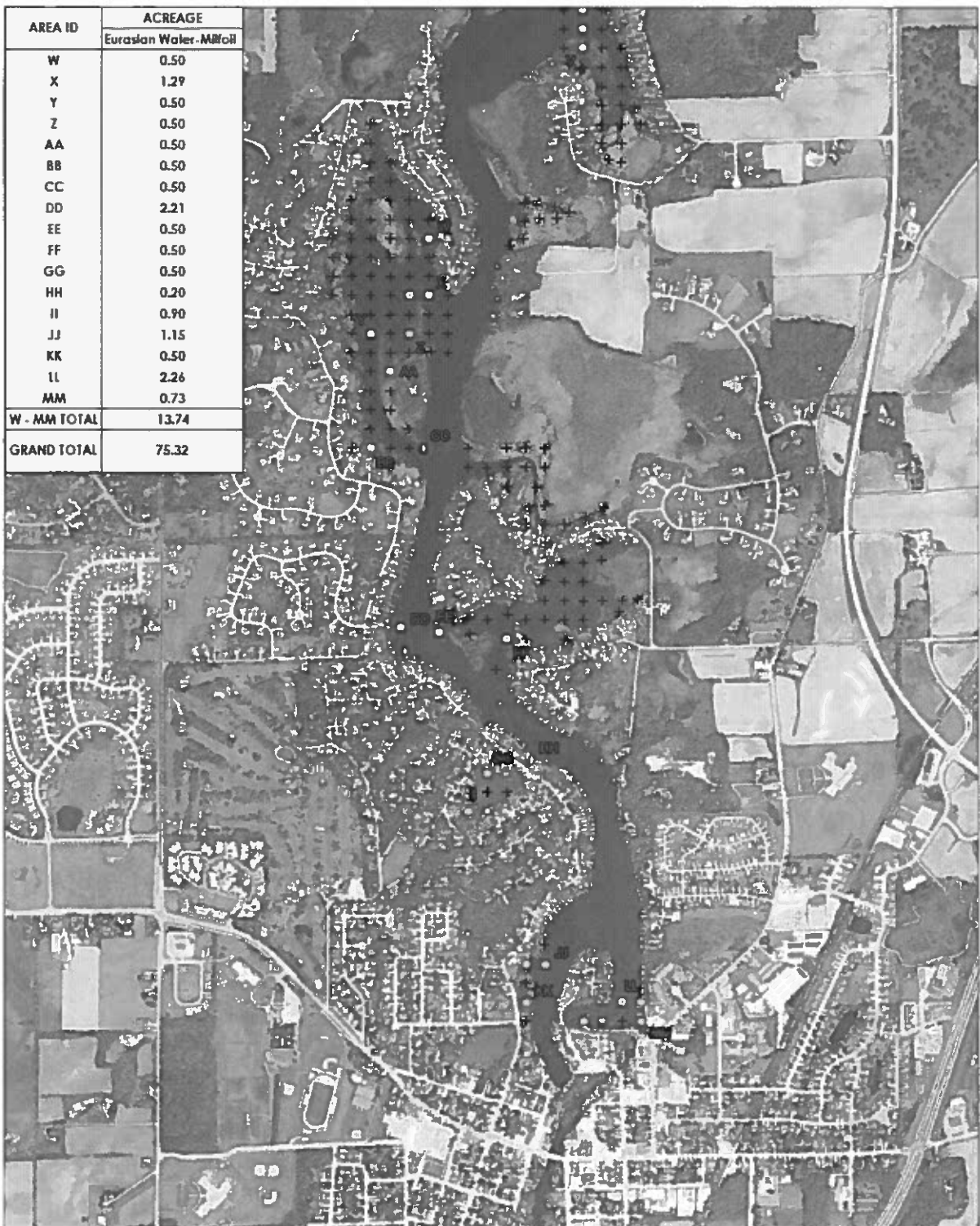
Project Location
 44.81N 82.314W (31.4, 8.314)
 1 of Waterford, Pacon Co., NY

19202500
 Prepared by EAS on 20/11/09-10
 Rechecked/Reviewed by AB on 22/11/09-11
 Interim/Annual Review by JS on 20/11/10-11



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AREA ID	ACREAGE
	Eurasian Water-Milfoil
W	0.50
X	1.29
Y	0.50
Z	0.50
AA	0.50
BB	0.50
CC	0.50
DD	2.21
EE	0.50
FF	0.50
GG	0.50
HH	0.20
II	0.90
JJ	1.15
KK	0.50
LL	2.26
MM	0.73
W - MM TOTAL	13.74
GRAND TOTAL	75.32



Notes
 1. Coordinate System: NAD 1983 StatePlane Wisconsin
 South: FIPS 4803 Feet
 2. Data Sources include: Stantec
 3. Orthophotography: 2013 NAP

- Legend**
- + GPS Sample Points*
 - Eurasian Water-Milfoil (Rake fullness of 1 only)
 - Eurasian Water-Milfoil (Rake fullness is about half full)
 - ◆ Eurasian Water-Milfoil / Curly leaf Pondweed
 - Aquatic Invasive Plant Area

Fullness Rating	Coverage	Description
1		1. Only one plant. Plants are not enough to cover the length of the rake head in a single layer.
2		2. There are enough plants to cover the length of the rake head in a single layer, but not enough to fully cover the basin.
3		3. The rake is completely covered and plants are not visible.

Figure No. 1
DRAFT

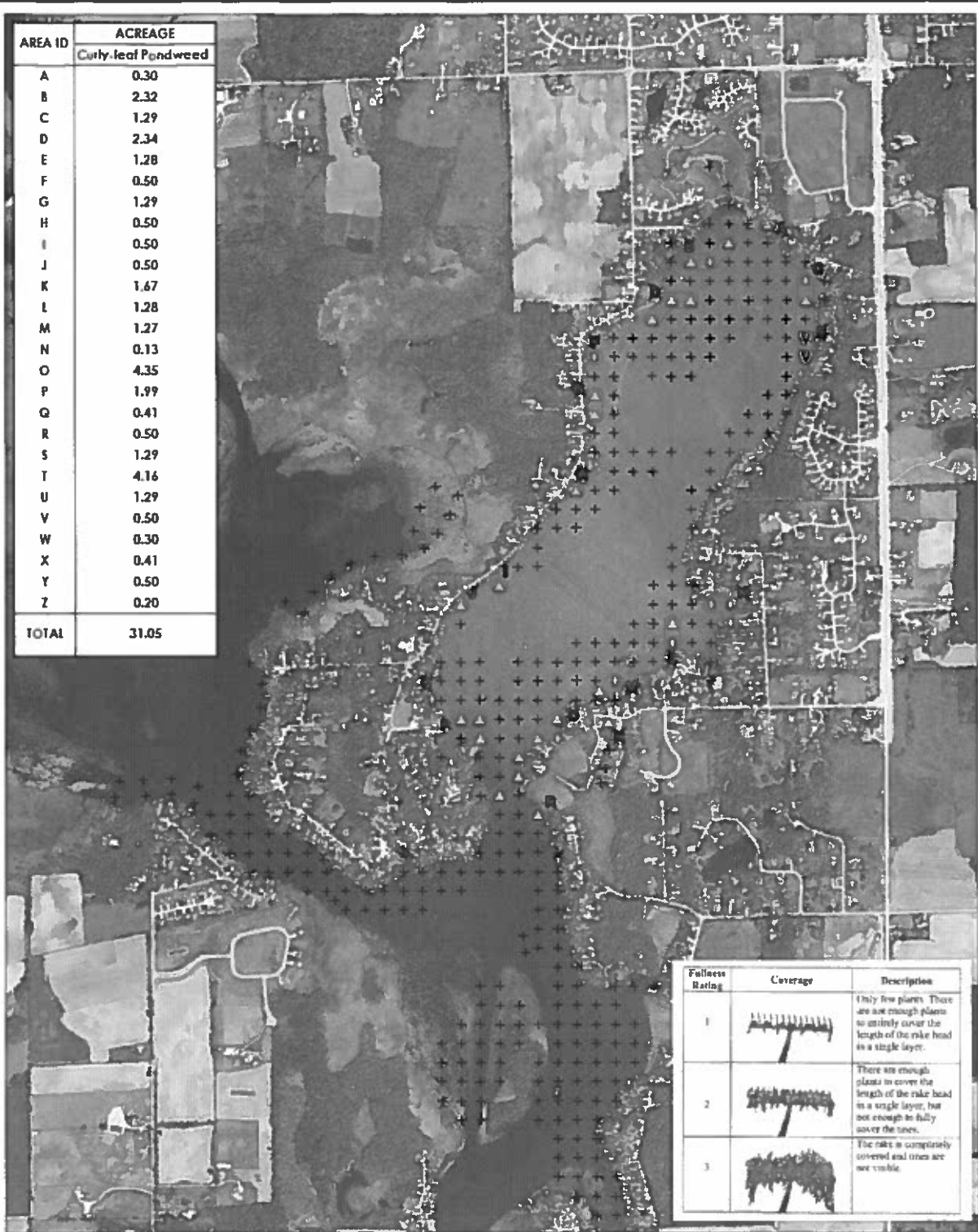
Tichigan Lake
2014 Post Treatment Survey
Eurasian Water-Milfoil

Client/Project:
 Waterford Waterway Management District
 Project Location:
 1401 81st, 82, 814, 311, 314, & 313
 T of Watford, Polk Co, WI
 Prepared by: EAS on 2014-08-18
 Technical Review by: AB on 2014-09-17
 Independent Review by: JJ on 2014-10-21



Disclaimer: Stantec assumes no responsibility for data, labeling or cartographic errors. This report is for informational purposes only and should not be used for any other purpose. The accuracy of the data is not warranted. Stantec is not responsible for any errors or omissions in this report.

AREA ID	ACREAGE
	Curly-leaf Pondweed
A	0.30
B	2.32
C	1.29
D	2.34
E	1.28
F	0.50
G	1.29
H	0.50
I	0.50
J	0.50
K	1.67
L	1.28
M	1.27
N	0.13
O	4.35
P	1.99
Q	0.41
R	0.50
S	1.29
T	4.16
U	1.29
V	0.50
W	0.30
X	0.41
Y	0.50
Z	0.20
TOTAL	31.05



Fullness Rating	Coverage	Description
1		Only few plants. There are not enough plants to entirely cover the length of the rake head in a single layer.
2		There are enough plants to cover the length of the rake head in a single layer, but not enough to fully cover the tines.
3		The rake is completely covered and tines are not visible.



- Legend**
- + CPS Sample Points*
 - ▲ Curly-leaf Pondweed (Rake fullness of 1 only)
 - ▼ Curly-leaf Pondweed [VSUAL]
 - ◆ Eurasian Water Milfoil /Curly-leaf Pondweed
 - Aquatic Invasive Plant Area

Notes
 1. Coordinate System: NAD 1983 StatePlane Wisconsin South FIPS 4803 Feet
 2. Data Sources Include: Starline
 3. Orthophotography: 2013 NADP

Disclaimer: Stantec assumes no responsibility for data submitted in electronic format. We warrant our work full responsibility for verifying the accuracy and completeness of the data. The recipient assumes liability for errors, omissions, inconsistencies and approvals from any and all clients, during in any

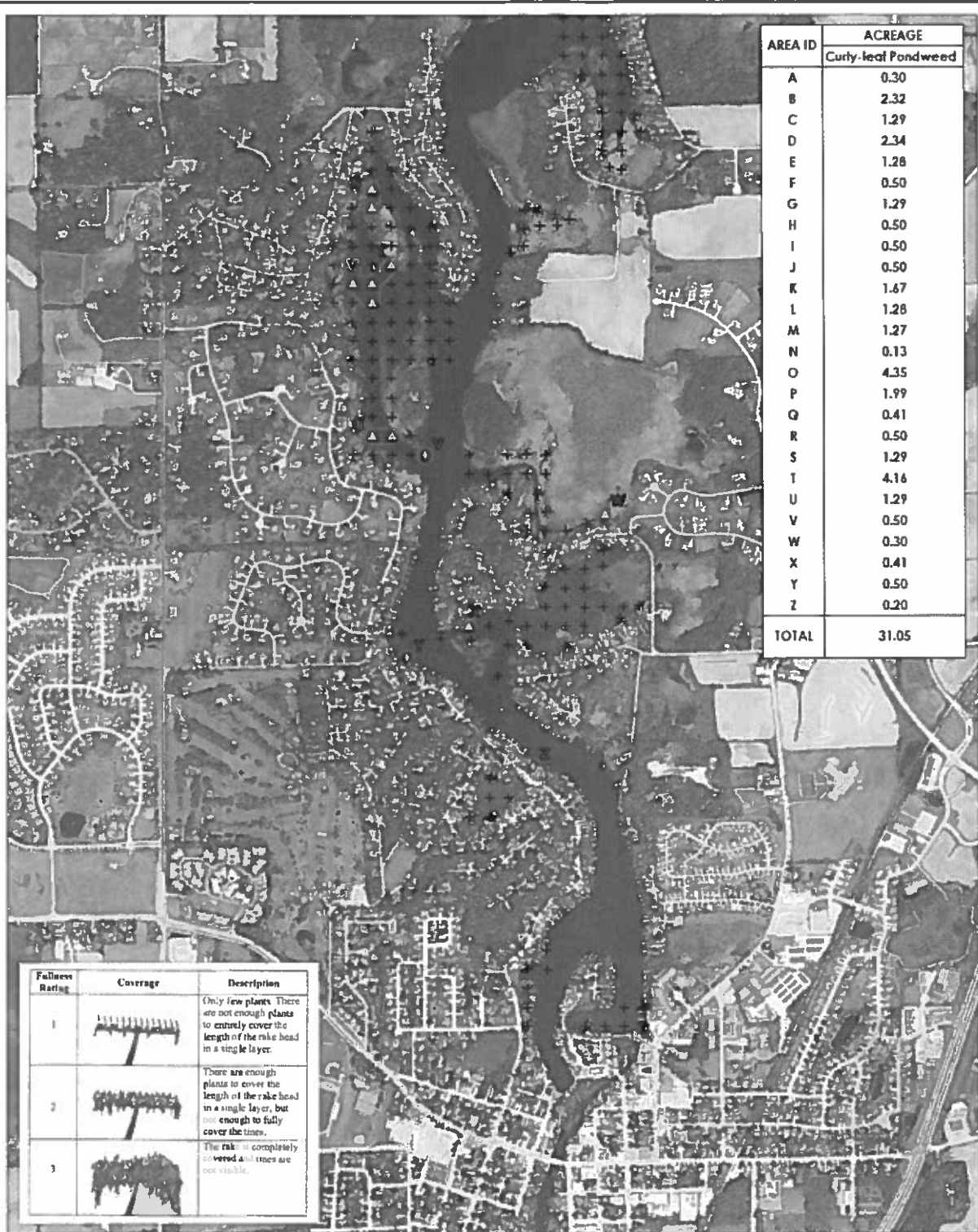
Figure No. **1** **DRAFT**

**Tichigan Lake
 2014 Post Treatment Survey
 Curly-leaf Pondweed**

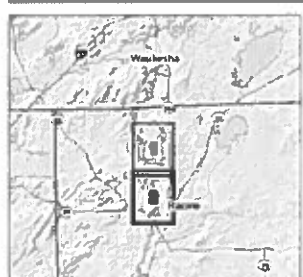
Client/Project:
 Waterford Waterway
 Management District

Prepared by: KAS on 2/16/2015
 Checked/Reviewed by: KAS on 2/16/2015
 Independent Review by: SE on 2/16/2015





Fullness Rating	Coverage	Description
1		Only few plants. There are not enough plants to entirely cover the length of the rake head in a single layer.
2		There are enough plants to cover the length of the rake head in a single layer, but not enough to fully cover the tines.
3		The rake is completely covered and tines are not visible.



- Legend**
- + CPS Sample Points*
 - ▲ Curly-leaf Pondweed (Rake fullness of 1 only)
 - ▼ Curly-leaf Pondweed (VSUAL)
 - ◆ Eurasian Water Milfoil / Curly-leaf Pondweed
 - Aquatic Invasive Plant Area

Notes

1. Coordinate System: NAD 1983 StatePlane Wisconsin South FIPS 4803 (feet)
2. Data Sources include: Starline
3. Orthophotography: 2013 NAIP

Disclaimer: Stantec assumes no responsibility for data supplied in electronic format. The recipient or user shall be responsible for verifying the accuracy and completeness of the data. The recipient warrants liability in all cases, express, implied, and apparent, from any and all claims arising in any way from the use of the data.

Figure No. **1** **DRAFT**

**Tichigan Lake
2014 Post Treatment Survey
Curly-leaf Pondweed**

Client/Project
Waterford Waterway
Management District

Prepared by: CAS on 20/14/09/18
 1. 04, 8198, 322, 114, 118, 314, & 382
 1 of Waterford, Pasco Co., WI
 19/09/2020
 Prepared by: CAS on 20/14/09/18
 1 of Waterford, Pasco Co., WI
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