



Professional Pond Management Products and Services
Aquatic Herbicide and Algaecide Applications
Lake Management Planning and Services
Pond Design and Development

Lake & Pond Resource LLC

“Providing Professional Resources for Management of Your Lake or Pond”

November 13, 2020

Waterford Waterway Management District
Aquatic Plant Management Committee

Re: 2020 Aquatic Plant Survey and Report, Waterford Waterway, Racine County, Wisconsin

Dear WWMD Board members:

In response to your request for aquatic plant management and surveying, Wisconsin Lake & Pond Resource, LLC (WLPR) visited the Waterford Waterway on multiple occasions in 2020. The purpose of these visits was to manage populations of aquatic invasive species (AIS), dense nuisance vegetation, and document the condition and spread of AIS, specifically Eurasian water-milfoil, to assess the need for future management.

Background Information

Waterford Waterway is an 1132-acre impoundment of the Fox River located in the Town of Waterford, Racine County, Wisconsin. The Waterway includes Tichigan Lake, the Fox River, and various shallow backwater areas of the reservoir, which has a maximum depth of 63 feet and mean depth of 6.3 feet. The Waterford Waterway Management District (WWMD) is an active lake district that has been managing aquatic plants on the waterway through chemical treatments, mechanical harvesting, and hand pulling. Two AIS, curly-leaf pondweed (CLP) and Eurasian water-milfoil (EWM), are present in the waterway.

Both CLP & EWM have been treated on the Waterway over the past decade. During recent surveys curly-leaf pondweed has primarily been found at low levels not requiring management. Eurasian water-milfoil has grown to nuisance levels and required management. Control of EWM has focused on the use of aquatic herbicides and ranged from spot treatment of areas 5.0 acres or less to whole-lake dosing. The most recent AIS management was completed in 2020 to 5.3 acres of the lake. Areas of native aquatic plant species also cause a direct navigational nuisance and are targeted for control in select areas throughout the season.

A copy of the WDNR approved permit and treatment records are included in Attachment A. To plan for 2020 management, a follow-up aquatic plant survey was completed on October 9, 2020 by Wisconsin Lake & Pond Resource.

2020 Aquatic Plant Survey

WLPR conducted the 2020 survey using a meander method to select areas that of the waterway for the presence of AIS, primarily EWM (Table 1). Each location was fully assessed with rake throws and visual observations to verify the presence of EWM. All EWM, were recorded on a GPS for mapping (Figures 1-5). Areas chosen for the survey were based on the following primary parameters:

- past growth of dense EWM
- current growth of dense EWM as noted during 2020 site visits
- secluded bays or lakes able to managed on their own while offering adequate contact time for chosen products.
- Areas with primarily developed shoreline

Table 1: AIS Survey Locations

ID	Name	Figure #
A	Tichigan Lake	2
B	Island View Bay	3
C	Buena Lake	4
D	Fowler Bay	5
E	Elm Island Bay	5
F	Waterford Lake	5

Populations of Eurasian water-milfoil undoubtedly exist outside the areas surveyed in 2020 but were not surveyed. Areas that do have dense EWM growth are much more sporadic in these areas. Reduced contact time and large areas of natural, undeveloped shoreline (Conservancy Bay) make meaningful reduction of target AIS unlikely.

The 2020 survey identified E/HWM growing at various densities and distribution in the target survey locations. Overall, 194.95 acres of EWM were identified in 2020 (Table 2, Figures 2-5). A breakdown of the EWM present by location is as follows:

Table 2: E/HWM Acres by Location

ID	Name	Acres	Priority
A	Tichigan Lake	94.5	1
B	Island View Bay	16.3	5
C	Buena Lake	53.6	2
D	Fowler Bay	9.1	6
E	Elm Island Bay	16.55	3
F	Waterford Lake	4.9	4
Total		194.95	---



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- **Tichigan Lake – Figure 2:** EWM was found around nearly the entire perimeter and often at high densities. Growth was primarily noted in depth of 2-10 feet and occasionally topped out in dense mats. Control of EWM here is the highest priority of the areas surveyed due to the large infestation and high use of the lake by all Waterway residents.
- **Island View Bay – Figure 3:** EWM was present, but sparse and often at low densities or individual stems or clumps of plants. Aquatic vegetation does present a navigational nuisance in Island View Bay which is worsened by the shallow water depth. However, the primary nuisance causing species was noted as common waterweed and coontail in 2020. The current density and distribution of EWM in the Bay does not require specific, directed management at this time
- **Buena Lake – Figure 4:** EWM has been noted as dense stands in the Buena Lake the past couple seasons and confirmed during the 2020 survey. Overall, density and spread of EWM was highest in the northern 2/3rds of Buena Lake and tended to lessen in the southern portion. EWM is the primary nuisance causing species present and active management is a priority for control. Populations of curly-leaf pondweed, also an AIS, are also dense at times early in the growing season here as well.
- **Fowler Bay – Figure 5:** Populations of EWM in Fowler Bay were extremely sporadic and low in density. Similar to Island View Bay, native species like coontail and the overall shallow water depths are the primary navigational concern here. Targeted control of EWM in not necessary at this time.
- **Elm Island Bay – Figure 5:** Elm Island had to main populations of EWM. The western population nearest the Fox River was very sporadic with only scattered stems present at low density. Control of EWM is not necessary for this portion of the Bay. In the easter part of Elm Island Bay, however, EWM was much more common and in locally dense, monotypic stands. EWM has been managed at whole-bay populations in the past.
- **Waterford Lake – Figure 5:** Waterford Lake’s EWM has seen targeted, whole-bay control efforts in the past that are periodically necessary. Earlier in 2020, the population of EWM was dense and reaching the surface. Nuisance control was taken during summer, 2020 site visits which helped reduce the density of EWM present. However, the frequency of EWM within Waterford Lake is still high. Targeted control of EWM may be necessary in the near future.

NEXT STEPS

Current DNR recommendations for control of AIS include the use of an integrated pest management approach, or IPM. The use of IPM includes changing methods of control, including but not limited to: varying herbicide active ingredients, mechanical harvesting, hand or suction harvesting, and no-action. Past and current surveys and management for the Waterway have shown that EWM can occupy large colonies and require management up to whole-lake or bay dosing.

The spread of EWM in Waterford Waterway recorded in 2020 varies from dense colonies (Tichigan Lake) to only sporadic, low densities occurrences (Fowler Bay). It is our recommendation to conduct EWM management within the surveyed areas on a periodic basis and only once it reaches levels to be dosed on a whole lake or bay application. This will allow for the best control and allow



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for recovery of the bay and cost savings for the District during non-targeted years. In addition, by targeting the areas of EWM in Tichigan Lake proper the population of EWM can be brought down to more a more manageable size with a goal to maintain it at small-scale populations of 5-10 acres total or less.

Past control efforts have focused on the use of 2,4-D, alone or in combination with a second active ingredient, with diminished results. Increasing research has shown that tolerance of 2,4-D by heavily managed EWM is a likely occurrence. Continued use of 2,4-D in the Waterford Waterway is likely to have limited results due to expected tolerance of the strain of EWM present.

It is recommended that management use an active ingredient that works quickly, is selective to limit non-target species impacts, and offers excellent long-term control. For this reason, we recommend the use of ProcellaCOR EC, active ingredient florpypauxifen-benzyl. ProcellaCOR EC has shown to be extremely effective against EWM, including tough to control strains, and works very quickly with limited non-target impacts. In addition, a product performance guarantee is offered by SePro, the manufacturers of ProcellaCOR EC. The performance guarantee states the SePro warrants that EWM will be controlled for three growing seasons from the application and will not reach nuisance levels in any contiguous, 1-acre area.

WWMD is recommended to treat the bays for EWM control on a rotational basis as necessary and following the priority listed in Table 2. Specific application rates would be obtained in continued project planning with SePro to achieve desired EWM management results.

If you have any questions, require any additional information, or would like a formal proposal on any of the above management options please contact us directly as follows:

Jim Scharl: (920) 872-2032 or jim@wisconsinlpr.com

Respectfully,

A handwritten signature in black ink, appearing to read "Jim Scharl", written in a cursive style.



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Attachment A: 2020 WDNR Permit & Treatment Records

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|jscharl signed on 2020-03-27T09:58:41

Site or Project Name:

The permit application will be saved automatically with this name

Activity Chemical Control Application

Eligibility:

(All questions must be no for it to be considered a private pond.)

Is there more than one property owner? Yes No

Will there be uncontrolled surface water discharge? Yes No

Does the water body have public access? Yes No

Enter previous years permit information below to import Contact Information (Optional)

Permit ID #:

Business Certification Number:

3200-004 Chemical Aquatic Control Application

NOTE: To be considered a private pond, a waterbody must meet all of the following requirements:

1. Confined to one property owner.
2. The pond has no uncontrolled surface water discharge.
3. No public access.

Upon submittal of your permit application, a **non-refundable \$20 permit processing fee will be charged**. Additional acreage fees will be refunded if the permit request is denied or if no treatment occurs.

3200-004 Chemical Aquatic Plant Control Application

- Annually complete all pages on Form 3200-004 for chemical plant management applications. Complete form 3200-004a for large scale treatments(exceeds 10.0 acres in size or 10% of the area of the water body that is 10 feet or less in depth) as required by NR107.04(3).
 - Form 3200-004 is completed electronically through this system.
 - Form 3200-004a must be completed outside the system and uploaded to the attachments section. Please refer to this link for a copy of this form: <http://dnr.wi.gov/files/pdf/forms/3200/3200-004A.pdf>
- Attach a map that shows the treatment location(s), treatment dimensions and riparian landowners. If requesting WPDES coverage, attach a water body map that shows surface outflow and receiving waters.
- For a large-scale treatment, attach evidence that a public notice has been published in a regional / local newspaper and if required that a public informational meeting has been conducted as defined in NR107.04(3).
- Pay fee online.
- Sign and Submit form.
- A signed permit application certifies to the Department that a copy of the application has been provided to any affected property owner's association/district and to landowners adjacent to treatment area.

Contact Information

Applicant or Pond Owner Information (Select Applicant Role)

Private Individual Contractor Lake Organization (Specify): WWMD

Organization Waterford Waterway Management District

Last Name:

First Name:

Mailing Address: 415 N Milwaukee St

City: Waterford

State: WI

Zip Code: 53185

Email: cbuchaklian@gmail.com

Phone Number: 262-957-0437
(xxx-xxx-xxxx)

Alternative Phone Number:
(xxx-xxx-xxxx)

Waterbody Address

Last Name: LLC

First Name: Wisconsin Lake & Pond

Street Address: 415 N Milwaukee St

City: Waterford

State: WI

Zip Code: 53185

Email:

Phone Number:
(xxx-xxx-xxxx)

Alternative Phone Number:
(xxx-xxx-xxxx)

Applicator

Name of Applicator Firm: Wisconsin Lake & Pond Resource, LLC

Applicator Certification #: 77803, 104226

Business Location License #: 93-015182-012226

Restricted Use Pesticide #:

Address: N7828 Town Hall Rd

City: Eldorad

State: WI

Zip: 54932

County: Fond du Lac

Email: jim@wisconsinlpr.com

Phone Number: 920-872-2032
(xxx-xxx-xxxx)

Adjacent Riparian Property Owners or Other Individuals Sponsoring Removal

Individuals and organizations (e.g. Lake District, Lake Association, Property Owners Association, County Department of Recreation), sponsoring removal.

Uploaded riparian owners to attachment tab

Name	Address	Phone	Email Address
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Site Information - Complete

Water Body to be Treated

Lake Property Owners Association or Lake District Representative : Chad Buchaklian

None

Water Body Name: Waterford Waterway / Tichigan Lake / Fox River

County: Racine

Latitude: 42.766314

Longitude: -88.213547

Section: 23

Township: 04

Range: 19

Direction: E W

Lake Surface Area: 1,132 acres

Estimated Surface area that is 10ft or less: 900 acres

Proposed Treatment Area

Area(s) Proposed for Control:

Treatment Length	Treatment Width	Estimated Acreage	Average Depth	Calculated Volume
0 ft. x	0 ft.	$\div 43,560 \text{ ft}^2 =$ 42.08 ac	3 ft =	126.24 ac-ft
0 ft. x	0 ft.	$\div 43,560 \text{ ft}^2 =$ 7.92 ac	4 ft =	31.68 ac-ft
		Estimated Acreage Grand Total	Calculated Volume Grand Total	
		50.00 ac	157.92 ac-ft	

Is the area with in or adjacent to a sensitive area designated by the Department of Natural Resources.

Yes No

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 II, complete and attach Form 3200-004A, Large-Scale Treatment Worksheet.

Chemical Aquatic Plant Control Information - Form 3200-004 (R 2/17)

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.].

Is this permit being requested in accordance with an approved Aquatic Plant Management Plan?

Yes No

Treatment Type:

Lake Pond Wetland Marina Other

Goal of Aquatic Plant Control:

- Maintain navigation channel
- Maintain boat landing and carry in access
- Improve fish habitat
- Maintain swimming area
- Control of invasive exotics
- Other

Nuisance Caused By:

- Algae
- Emergent water plants (majority of leaves & stems growing above water surface, e.g. cattail, bulrushes)
- Floating water plants (majority of leaves floating on water surface, e.g., water lilies, duckweed)
- Submerged water plants (leaves & stems below surface, flowering parts may be exposed: milfoil, coontail)
- Other

List Target Plants

- | | | |
|---|---|--|
| <input checked="" type="checkbox"/> Algae | <input type="checkbox"/> Flowering Rush | <input type="checkbox"/> Purple Loosestrife |
| <input type="checkbox"/> Common/Glossy Buckthorn | <input type="checkbox"/> Hybrid Cattail | <input type="checkbox"/> Reed Canary Grass |
| <input checked="" type="checkbox"/> Coontail | <input checked="" type="checkbox"/> Hybrid Watermilfoil | <input type="checkbox"/> Reed Manna Grass |
| <input checked="" type="checkbox"/> Curly-Leaf Pondweed | <input type="checkbox"/> Japanese Knotweed | <input type="checkbox"/> Starry Stonewort |
| <input type="checkbox"/> Duckweed | <input type="checkbox"/> Naiad | <input type="checkbox"/> Yellow Floating Heart |
| <input checked="" type="checkbox"/> Elodea | <input type="checkbox"/> Narrow-Leaf Cattail | <input type="checkbox"/> Yellow Iris |
| <input checked="" type="checkbox"/> Eurasian Watermilfoil | <input type="checkbox"/> Phragmites | <input type="checkbox"/> Pondweed |

Other Target Plants:

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

Chemical Control

Full Trade Name of Proposed Chemical(s)

Select Chemical Name: AquaStrike

Select Chemical Name: Aquathol K Aquatic Herbicide

Select Chemical Name: Captain Liquid Copper Algaecide

Select Chemical Name: Clipper SC Aquatic Herbicide

Select Chemical Name: Tribune Herbicide

Select Chemical Name: Weedar 64 Broadleaf Herbicide

Other (not listed above) Other:

Have the proposed chemicals been permitted in a prior year on the proposed site?

All Some None

Method of Application:

What were the results of the treatment?

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

Alternatives to Chemical Control:	Feasible?	If No, Why Not?
1. Mechanical harvesting	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input type="text"/>
2. Manual removal	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="text" value="too large an area"/>
3. Sediment screens/covers	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="text" value="non-target ecosystem damage"/>
4. Dredging	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="text" value="not feasible"/>
5. Lake drawdown	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="text" value="currently not approved by district members"/>
6. Nutrient controls in watershed	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="text" value="not feasible"/>
7. Other:	<input type="radio"/> Yes <input type="radio"/> No	<input type="text"/>

Note: If proposed treatment involves multiple properties, consider feasibility of EACH alternative for EACH property owner.

Will surface water outflow and/or overflow be controlled to prevent chemical loss?

Yes No

Is the treatment area greater than 5% of surface area?

Yes No

WPDES Permit Request

Is WPDES coverage being requested? Refer to

<http://dnr.wi.gov/topic/wastewater/aquaticpesticides.html> for more information

Yes - complete section VII with signature.

No

Already have WPDES






WPDES coverage not needed

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	 File Attachment	WWMD mailing list 2020.pdf
Public Notice	 File Attachment	WWMD permit legal publication confirmation 2020.pdf
Large Scale Worksheet	 File Attachment	
Site Map	 File Attachment	Waterford AISTreat 2020 DRAFTMAP.pdf
Site Map	 File Attachment	Waterford NAVTX 2020 DRAFTMAP.pdf

Fee Calculation

Chemical Control Application

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.

If Proposed treatment is over 0.25, calculate acreage fee: (round up to nearest whole acre, to maximum of 50 acres) acres X \$25 per acre = \$	50.00
If proposed treatment is less than 0.25 acre, acreage fee is \$0	\$1,250.00
Basic Permit Fee (non-refundable)	\$20.00
Total Fee	\$1,270

Payment Information

Invoice Number: WP-00022750

Payment Confirmation Number: WS2WT3004511564

Amount Paid: \$1,270

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 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 project 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 will provide 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.
- 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>

All portions of this permit, map and accompanying cover letter must be in possession of the chemical applicator at the time of treatment. During treatment all provisions of Chapter NR 107 107.07 and NR 107.08, Wis. Adm. Code, must be complied with, as well as the specific conditions contained in the permit cover letter.

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|jscharl signed on 2020-03-27T09...

I hereby certify that the above information is true and correct and that copies of this submittal have been provided to the appropriate parties named in the contact section and that the conditions of the permit and pesticide use will be adhered to.

Notice: Completion of this form is a condition of the permit and provides records required by WDNR (NR 107) and DATCP (ATCP 29.21 and 29.22). The Department may not issue you future permits unless you complete and submit this form. Personal information collected will be used for administrative purposes and may be provided to requesters to the extent required by Wisconsin's Open Records Law [ss. 19.31-19.39, Wis. Stats.].

Submit this form: (1) immediately if any unusual circumstances occurred during treatment
(2) as soon after treatment as possible, no later than 30 days
(3) by October 1 if no treatment occurred

Completion of this form along with the permit satisfies the requirements of WDNR (NR 107) and DATCP (ATCP 29.21 and 29.22).

General Permit Information

Permit Number SE-2020-52-6937	Water body Name (including ponds, e.g., Smith Pond) Waterford Waterway / Tichigan Lake / Fox River		
County Racine	Permit Holder Name (Customer Name) Waterford Waterway Management District		
Permit Holder Address 415 N Milwaukee St	City Waterford	State WI	Zip Code 53185

Treatment Information

Treatment Date (mm/dd/yyyy) 5/15/2020	Starting Time (24:00 hour) 09:15	Ending Time (24:00 hour) 11:30	Water Temp 57	<input type="checkbox"/> C <input checked="" type="checkbox"/> F	Ambient Air Temp 60	<input type="checkbox"/> C <input checked="" type="checkbox"/> F
Wind Speed (mph) 0-3	Wind Direction West	Expected Duration of Chemical Residuals 7 days				

Adverse Conditions Noted (i.e., dead fish, spawning fish, algae bloom, etc.)

If adverse conditions noted, indicate corrective actions taken

Comments

Onsite Supervision Present? No If Yes, Supervisor Name :

Mixing and Loading Site Location (if other than business site or from prepackaged retail container or applied with equipment with a total capacity of not more than 5 gallons liquid or 50 pounds dry)
Private boat launch

Herbicide Treatment and Water Use Restrictions Signs Posted In Accordance With NR 107?

Applicator shall provide each customer with a free copy of each pesticide label used (if requested)

Applicator Information

Individual or Business Name Wisconsin Lake & Pond Resource, LLC	Telephone xxx -xxx-xxxx 920-872-2032 x	
Street Address N7828 Town Hall Rd		
City Eldorad	State WI	ZIP Code 54932

Individuals Making Pesticide Application	Last Name	First	Certification #
	Scharl	James	Cert: 77803, Lic:224355

Name of Person Completing Form

James Scharl

Aquatic Plant Management Herbicide Treatment Record

Form 3200-111 (R 11/16)

Page 2 of 2

Date: 5/15/2020

Treatment Site and Chemical Information

Site No	Property Name	Address / Fire No	Treated acreage	Permitted Acreage	Sensitive Area?	Latitude	Longitude
A-19	Tichigan Lake	Tichigan Lake	5.30	5.30	<input type="checkbox"/>	42.7663	-88.2135

Herbicide Name	EPA Reg. No.	Amount Applied	Units	Application Concentration Rate (mg/l = ppm)
<u>Aquathol K Aquatic Herbicide</u>	70506-176	36.75	gallons	3.61 ppm

<u>Weedar 64 Broadleaf Herbicide</u>	71368-1	16.75	gallons	1.48 ppm
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Other (not listed above) Other:

Site No	Property Name	Address / Fire No	Treated acreage	Permitted Acreage	Sensitive Area?	Latitude	Longitude
AIS ...	Conservancy ...	Conservancy Bay	1.00	1.00	<input type="checkbox"/>	42.7663	-88.2135

Herbicide Name	EPA Reg. No.	Amount Applied	Units	Application Concentration Rate (mg/l = ppm)
<u>Captain Liquid Copper Algaecide</u>	67690-9	1	gallons	0.111 ppm

<u>Clipper SC Aquatic Herbicide</u>	71368-114	0.25	gallons	0.125 ppm
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<u>Tribune Herbicide</u>	100-1390	1	gallons	0.245 ppm
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Other (not listed above) Other:

Aquatics at Treatment Site: TS=Target Species SP= Species Present

TS	SP	Site(s)	TS	SP	Site(s)	TS	SP	Site(s)
<input type="checkbox"/>	<input type="checkbox"/>	Cattail	<input type="checkbox"/>	<input type="checkbox"/>	Flat-Stem Pondweed	<input type="checkbox"/>	<input type="checkbox"/>	Richardson Pondweed
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Chara	<input type="checkbox"/>	<input type="checkbox"/>	Floating-Leaf Pondweed	<input type="checkbox"/>	<input type="checkbox"/>	Robbins Pondweed
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Coontail	<input type="checkbox"/>	<input type="checkbox"/>	Illinois Pondweed	<input type="checkbox"/>	<input type="checkbox"/>	Sago Pondweed
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Curly-Leaf Pondweed	<input type="checkbox"/>	<input type="checkbox"/>	Large-Leaf Pondweed	<input type="checkbox"/>	<input type="checkbox"/>	Watershield
<input type="checkbox"/>	<input type="checkbox"/>	Duckweed	<input type="checkbox"/>	<input type="checkbox"/>	Northern Milfoil	<input type="checkbox"/>	<input type="checkbox"/>	White Water Lily
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Elodea	<input type="checkbox"/>	<input type="checkbox"/>	Phragmites	<input type="checkbox"/>	<input type="checkbox"/>	Wild Celery
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Eurasian /hybrid Milfoil	<input type="checkbox"/>	<input type="checkbox"/>	Planktonic Algae	<input type="checkbox"/>	<input type="checkbox"/>	White-Stem Pondweed
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Filamentous Algae	<input type="checkbox"/>	<input type="checkbox"/>	Purple Loosestrife	<input type="checkbox"/>	<input type="checkbox"/>	

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County Racine	Permit Holder Name (Customer Name) Waterford Waterway Management District		

Permit Holder Address 415 N Milwaukee St	City Waterford	State WI	Zip Code 53185
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Treatment Information

Treatment Date (mm/dd/yyyy) 6/3/2020	Starting Time (24:00 hour) 08:45	Ending Time (24:00 hour) 17:45	Water Temp 72	<input type="checkbox"/> C <input checked="" type="checkbox"/> F	Ambient Air Temp 70	<input type="checkbox"/> C <input checked="" type="checkbox"/> F
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Wind Speed (mph) 3-5	Wind Direction North West	Expected Duration of Chemical Residuals 5 days
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Adverse Conditions Noted (i.e., dead fish, spawning fish, algae bloom, etc.)

If adverse conditions noted, indicate corrective actions taken

Comments

Onsite Supervision by DATCP and/or DNR Staff <input type="radio"/> Yes <input checked="" type="radio"/> No	If Yes, Supervisor Name :
---	---------------------------

Mixing and Loading Site Location (if other than business site or from prepackaged retail container or applied with equipment with a total capacity of not more than 5 gallons liquid or 50 pounds dry)
private boat launch

Water User Restriction

No Restrictions Consuming Fish Pet/Livestock Water Irrigation (Crop)
 Swimming Drinking Water Irrigation Other:

Herbicide Treatment and Water Use Restrictions Signs Posted In Accordance With NR 107 and ATCP 29.22?

Applicator shall provide each customer with a free copy of each pesticide label used (if requested)

Applicator Information

Individual or Business Name Wisconsin Lake & Pond Resource, LLC	Telephone xxx -xxx-xxxx 920-872-2032 x
--	---

Street Address
N7828 Town Hall Rd

City Eldorado	State WI	ZIP Code 54932
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Individuals Making or Supervising Pesticide Application	Last Name	First	Certification #	License #
	scharl	james	77803	224355
	sabel	tyler	509-T	491499

Name of Person Completing Form

Date: 6/3/2020

Aquatic Plant Management Herbicide Treatment Record

Form 3200-111 (R4/20)

Page 2 of 2

Site No	Property Name	Address / Fire No	Treated acreage	Permitted Acreage	Sensitive Area?	Latitude	Longitude
Nav	Lanes	n/a	26.60	42.08	<input type="checkbox"/>	42.7663	-88.2135

Herbicide Name	EPA Reg. No.	Amount Applied	Units	Application Concentration Rate (mg/l = ppm)
<u>Captain Liquid Copper Algaecide</u>	67690-9	24	gallons	0.111 ppm
<u>Clipper SC Aquatic Herbicide</u>	71368-114	6	gallons	0.125 ppm
<u>Tribune Herbicide</u>	100-1390	24	gallons	0.245 ppm

Other (not listed above) Other:

TS	SP	Site(s)	TS	SP	Site(s)	TS	SP	Site(s)
<input type="checkbox"/>	<input type="checkbox"/>	Cattail	<input type="checkbox"/>	<input type="checkbox"/>	Flat-Stem Pondweed	<input type="checkbox"/>	<input type="checkbox"/>	Richardson Pondweed
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Chara	<input type="checkbox"/>	<input type="checkbox"/>	Floating-Leaf Pondweed	<input type="checkbox"/>	<input type="checkbox"/>	Robbins Pondweed
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Coontail	<input type="checkbox"/>	<input type="checkbox"/>	Illinois Pondweed	<input type="checkbox"/>	<input type="checkbox"/>	Sago Pondweed
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Curly-Leaf Pondweed	<input type="checkbox"/>	<input type="checkbox"/>	Large-Leaf Pondweed	<input type="checkbox"/>	<input type="checkbox"/>	Watershield
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Duckweed	<input type="checkbox"/>	<input type="checkbox"/>	Northern Milfoil	<input type="checkbox"/>	<input checked="" type="checkbox"/>	White Water Lily
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Elodea	<input type="checkbox"/>	<input type="checkbox"/>	Phragmites	<input type="checkbox"/>	<input type="checkbox"/>	Wild Celery
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Eurasian /hybrid Milfoil	<input type="checkbox"/>	<input type="checkbox"/>	Planktonic Algae	<input type="checkbox"/>	<input type="checkbox"/>	White-Stem Pondweed
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Filamentous Algae	<input type="checkbox"/>	<input type="checkbox"/>	Purple Loosestrife	<input type="checkbox"/>	<input type="checkbox"/>	

Required Attachments and Supplemental Information

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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.

Site Map

 File Attachment

Treatment Plan

 File Attachment
Fee Calculation

Chemical Treatment Record

No additional payment required for submitting treatment records.

Notice: Completion of this form is a condition of the permit and provides records required by WDNR (NR 107) and DATCP (ATCP 29.21 and 29.22). The Department may not issue you future permits unless you complete and submit this form. Personal information collected will be used for administrative purposes and may be provided to requesters to the extent required by Wisconsin's Open Records Law [ss. 19.31-19.39, Wis. Stats.].

Submit this form: (1) immediately if any unusual circumstances occurred during treatment
(2) as soon after treatment as possible, no later than 30 days
(3) by October 1 if no treatment occurred

Completion of this form along with the permit satisfies the requirements of WDNR (NR 107) and DATCP (ATCP 29.21 and 29.22).

Permit Number SE-2020-52-6937	Water body Name (including ponds, e.g., Smith Pond) Waterford Waterway / Tlchigan Lake / Fox River		
County Racine	Permit Holder Name (Customer Name) Waterford Waterway Management District		

Permit Holder Address 415 N Milwaukee St	City Waterford	State WI	Zip Code 53185
---	-------------------	-------------	-------------------

Treatment Information

Treatment Date (mm/dd/yyyy) 6/4/2020	Starting Time (24:00 hour) 10:30	Ending Time (24:00 hour) 14:30	Water Temp 78	<input type="checkbox"/> C <input checked="" type="checkbox"/> F	Ambient Air Temp 80	<input type="checkbox"/> C <input checked="" type="checkbox"/> F
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Wind Speed (mph) 4-7	Wind Direction North	Expected Duration of Chemical Residuals 5 days
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Adverse Conditions Noted (i.e., dead fish, spawning fish, algae bloom, etc.)

If adverse conditions noted, indicate corrective actions taken

Comments

Onsite Supervision by DATCP and/or DNR Staff <input type="radio"/> Yes <input checked="" type="radio"/> No	If Yes, Supervisor Name :
---	---------------------------

Mixing and Loading Site Location (if other than business site or from prepackaged retail container or applied with equipment with a total capacity of not more than 5 gallons liquid or 50 pounds dry)

Water User Restriction

No Restrictions Consuming Fish Pet/Livestock Water Irrigation (Crop)
 Swimming Drinking Water Irrigation Other:

Herbicide Treatment and Water Use Restrictions Signs Posted In Accordance With NR 107 and ATCP 29.22?

Applicator shall provide each customer with a free copy of each pesticide label used (if requested)

Applicator Information

Individual or Business Name Wisconsin Lake & Pond Resource, LLC	Telephone xxx -xxx-xxxx 920-872-2032 x
--	---

Street Address
N7828 Town Hall Rd

City Eldorad	State WI	ZIP Code 54932
-----------------	-------------	-------------------

Individuals Making or Supervising Pesticide Application	Last Name	First	Certification #	License #
	Scharl	James	77803	224355

Name of Person Completing Form
James Scharl

Date:

Aquatic Plant Management Herbicide Treatment Record

Form 3200-111 (R4/20)

Site No	Property Name	Address / Fire No	Treated acreage	Permitted Acreage	Sensitive Area?	Latitude	Longitude
lan...	n/a	n/a	6.60	42.80	<input type="checkbox"/>	42.7663	-88.2135

Herbicide Name	EPA Reg. No.	Amount Applied	Units	Application Concentration Rate (mg/l = ppm)
<u>Captain Liquid Copper Algaecide</u>	67690-9	5	gallons	0.111 ppm
<u>Clipper SC Aquatic Herbicide</u>	71368-114	1.25	gallons	0.125 ppm
<u>Tribune Herbicide</u>	100-1390	5	gallons	0.245 ppm

Other (not listed above) Other:

TS	SP	Site(s)	TS	SP	Site(s)	TS	SP	Site(s)
<input type="checkbox"/>	<input type="checkbox"/>	Cattail	<input type="checkbox"/>	<input type="checkbox"/>	Flat-Stem Pondweed	<input type="checkbox"/>	<input type="checkbox"/>	Richardson Pondweed
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Chara	<input type="checkbox"/>	<input type="checkbox"/>	Floating-Leaf Pondweed	<input type="checkbox"/>	<input type="checkbox"/>	Robbins Pondweed
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Coontail	<input type="checkbox"/>	<input type="checkbox"/>	Illinois Pondweed	<input type="checkbox"/>	<input type="checkbox"/>	Sago Pondweed
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Curly-Leaf Pondweed	<input type="checkbox"/>	<input type="checkbox"/>	Large-Leaf Pondweed	<input type="checkbox"/>	<input type="checkbox"/>	Watershield
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Duckweed	<input type="checkbox"/>	<input type="checkbox"/>	Northern Milfoil	<input type="checkbox"/>	<input checked="" type="checkbox"/>	White Water Lily
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Elodea	<input type="checkbox"/>	<input type="checkbox"/>	Phragmites	<input type="checkbox"/>	<input type="checkbox"/>	Wild Celery
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Eurasion /hybrid Milfoil	<input type="checkbox"/>	<input type="checkbox"/>	Planktonic Algae	<input type="checkbox"/>	<input type="checkbox"/>	White-Stem Pondweed
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Filamentous Algae	<input type="checkbox"/>	<input type="checkbox"/>	Purple Loosestrife	<input type="checkbox"/>	<input type="checkbox"/>	

Required Attachments and Supplemental Information

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Site Map

Treatment Plan

Fee Calculation

Chemical Treatment Record

No additional payment required for submitting treatment records.

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Submit this form: (1) immediately if any unusual circumstances occurred during treatment
 (2) as soon after treatment as possible, no later than 30 days
 (3) by October 1 if no treatment occurred

Completion of this form along with the permit satisfies the requirements of WDNR (NR 107) and DATCP (ATCP 29.21 and 29.22).

Permit Number SE-2020-52-6937	Water body Name (including ponds, e.g., Smith Pond) Waterford Waterway / Fox River/ Tichigan Lake
County Racine	Permit Holder Name (Customer Name) Waterford Waterway Management District

Permit Holder Address 415 N Milwaukee St	City Waterford	State WI	Zip Code 53185
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Treatment Information

Treatment Date (mm/dd/yyyy) 7/1/2020	Starting Time (24:00 hour) 09:00	Ending Time (24:00 hour) 16:00	Water Temp 81	<input type="checkbox"/> C <input checked="" type="checkbox"/> F	Ambient Air Temp 86	<input type="checkbox"/> C <input checked="" type="checkbox"/> F
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Wind Speed (mph) 3-5	Wind Direction South West	Expected Duration of Chemical Residuals 5 days
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Adverse Conditions Noted (i.e., dead fish, spawning fish, algae bloom, etc.)

If adverse conditions noted, indicate corrective actions taken

Comments

Onsite Supervision by DATCP and/or DNR Staff Yes No If Yes, Supervisor Name :

Mixing and Loading Site Location (if other than business site or from prepackaged retail container or applied with equipment with a total capacity of not more than 5 gallons liquid or 50 pounds dry)

Water User Restriction

No Restrictions Consuming Fish Pet/Livestock Water Irrigation (Crop)
 Swimming Drinking Water Irrigation Other:

Herbicide Treatment and Water Use Restrictions Signs Posted In Accordance With NR 107 and ATCP 29.22?

Applicator shall provide each customer with a free copy of each pesticide label used (if requested)

Applicator Information

Individual or Business Name Wisconsin Lake & Pond Resource, LLC	Telephone xxx -xxx-xxxx 920-872-2032 x
--	---

Street Address
N7828 Town Hall Rd

City Eldorad	State WI	ZIP Code 54932
-----------------	-------------	-------------------

Individuals Making or Supervising Pesticide Application	Last Name	First	Certification #	License #
	scharl	james	77803	224355
	schmitz	jayden	102975	323324

Name of Person Completing Form

Date: 7/1/2020

Aquatic Plant Management Herbicide Treatment Record

Form 3200-111 (R4/20)

Page 2 of 2

Site No	Property Name	Address / Fire No	Treated acreage	Permitted Acreage	Sensitive Area?	Latitude	Longitude
lan...	n/a	n/a	20.60	42.80	<input type="checkbox"/>	42.7663	-88.2135

Herbicide Name	EPA Reg. No.	Amount Applied	Units	Application Concentration Rate (mg/l = ppm)
<u>Captain Liquid Copper Algaecide</u>	67690-9	17	gallons	0.111 ppm
<u>Clipper SC Aquatic Herbicide</u>	71368-114	4.25	gallons	0.125 ppm
<u>Tribune Herbicide</u>	100-1390	17	gallons	0.245 ppm

Other (not listed above) Other:

TS	SP	Site(s)	TS	SP	Site(s)	TS	SP	Site(s)
<input type="checkbox"/>	<input type="checkbox"/>	Cattail	<input type="checkbox"/>	<input type="checkbox"/>	Flat-Stem Pondweed	<input type="checkbox"/>	<input type="checkbox"/>	Richardson Pondweed
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Chara	<input type="checkbox"/>	<input type="checkbox"/>	Floating-Leaf Pondweed	<input type="checkbox"/>	<input type="checkbox"/>	Robbins Pondweed
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Coontail	<input type="checkbox"/>	<input type="checkbox"/>	Illinois Pondweed	<input type="checkbox"/>	<input type="checkbox"/>	Sago Pondweed
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Curly-Leaf Pondweed	<input type="checkbox"/>	<input type="checkbox"/>	Large-Leaf Pondweed	<input type="checkbox"/>	<input type="checkbox"/>	Watershield
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Duckweed	<input type="checkbox"/>	<input type="checkbox"/>	Northern Milfoil	<input type="checkbox"/>	<input checked="" type="checkbox"/>	White Water Lily
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Elodea	<input type="checkbox"/>	<input type="checkbox"/>	Phragmites	<input type="checkbox"/>	<input type="checkbox"/>	Wild Celery
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Eurasian /hybrid Milfoil	<input type="checkbox"/>	<input type="checkbox"/>	Planktonic Algae	<input type="checkbox"/>	<input type="checkbox"/>	White-Stem Pondweed
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Filamentous Algae	<input type="checkbox"/>	<input type="checkbox"/>	Purple Loosestrife	<input type="checkbox"/>	<input type="checkbox"/>	

Required Attachments and Supplemental Information

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Site Map

 File Attachment

Treatment Plan

 File Attachment
Fee Calculation

Chemical Treatment Record

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(2) as soon after treatment as possible, no later than 30 days
(3) by October 1 if no treatment occurred

Completion of this form along with the permit satisfies the requirements of WDNR (NR 107) and DATCP (ATCP 29.21 and 29.22).

Permit Number SE-2020-52-6937	Water body Name (including ponds, e.g., Smith Pond) Waterford Waterway - tichigan lake / fox river
County Racine	Permit Holder Name (Customer Name) Waterford Waterway Management District

Permit Holder Address 415 N Milwaukee St	City Waterford	State WI	Zip Code 53185
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Treatment Information

Treatment Date (mm/dd/yyyy) 8/3/2020	Starting Time (24:00 hour) 09:30	Ending Time (24:00 hour) 15:45	Water Temp 77	<input type="checkbox"/> C <input checked="" type="checkbox"/> F	Ambient Air Temp 70	<input type="checkbox"/> C <input checked="" type="checkbox"/> F
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Wind Speed (mph) 5-10	Wind Direction North East	Expected Duration of Chemical Residuals 5 days
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Adverse Conditions Noted (i.e., dead fish, spawning fish, algae bloom, etc.)

If adverse conditions noted, indicate corrective actions taken

Comments

Onsite Supervision by DATCP and/or DNR Staff Yes No If Yes, Supervisor Name :

Mixing and Loading Site Location (if other than business site or from prepackaged retail container or applied with equipment with a total capacity of not more than 5 gallons liquid or 50 pounds dry)
private boat launch

Water User Restriction
 No Restrictions Consuming Fish Pet/Livestock Water Irrigation (Crop)
 Swimming Drinking Water Irrigation Other:

Herbicide Treatment and Water Use Restrictions Signs Posted In Accordance With NR 107 and ATCP 29.22?

Applicator shall provide each customer with a free copy of each pesticide label used (if requested)

Applicator Information

Individual or Business Name Wisconsin Lake & Pond Resource, LLC	Telephone xxx -xxx-xxxx 920-872-2032 x
--	---

Street Address
N7828 Town Hall Rd

City Eldorad	State WI	ZIP Code 54932
-----------------	-------------	-------------------

Individuals Making or Supervising Pesticide Application	Last Name	First	Certification #	License #
	scharl	james	77803	224355
	sabel	tyler	509-T	491499

Name of Person Completing Form

Date: 8/3/2020

Aquatic Plant Management Herbicide Treatment Record

Form 3200-111 (R4/20)

Page 2 of 2

Site No	Property Name	Address / Fire No	Treated acreage	Permitted Acreage	Sensitive Area?	Latitude	Longitude
La...	varies	N/A	14.10	42.80	<input type="checkbox"/>	42.7663	-88.2135

Herbicide Name	EPA Reg. No.	Amount Applied	Units	Application Concentration Rate (mg/l = ppm)
<u>Captain Liquid Copper Algaecide</u>	67690-9	12.5	gallons	0.111 ppm
<u>Clipper SC Aquatic Herbicide</u>	71368-114	3.125	gallons	0.125 ppm
<u>Tribune Herbicide</u>	100-1390	12.5	gallons	0.245 ppm

Other (not listed above) Other:

TS	SP	Site(s)	TS	SP	Site(s)	TS	SP	Site(s)
<input type="checkbox"/>	<input type="checkbox"/>	Cattail	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Flat-Stem Pondweed	<input type="checkbox"/>	<input type="checkbox"/>	Richardson Pondweed
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Chara	<input type="checkbox"/>	<input type="checkbox"/>	Floating-Leaf Pondweed	<input type="checkbox"/>	<input type="checkbox"/>	Robbins Pondweed
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Coontail	<input type="checkbox"/>	<input type="checkbox"/>	Illinois Pondweed	<input type="checkbox"/>	<input type="checkbox"/>	Sago Pondweed
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Curly-Leaf Pondweed	<input type="checkbox"/>	<input type="checkbox"/>	Large-Leaf Pondweed	<input type="checkbox"/>	<input type="checkbox"/>	Watershield
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Duckweed	<input type="checkbox"/>	<input type="checkbox"/>	Northern Milfoil	<input type="checkbox"/>	<input checked="" type="checkbox"/>	White Water Lily
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Elodea	<input type="checkbox"/>	<input type="checkbox"/>	Phragmites	<input type="checkbox"/>	<input type="checkbox"/>	Wild Celery
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Eurasian /hybrid Milfoil	<input type="checkbox"/>	<input type="checkbox"/>	Planktonic Algae	<input type="checkbox"/>	<input type="checkbox"/>	White-Stem Pondweed
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Filamentous Algae	<input type="checkbox"/>	<input type="checkbox"/>	Purple Loosestrife	<input type="checkbox"/>	<input type="checkbox"/>	

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Site Map

 File Attachment

Treatment Plan

 File Attachment

Fee Calculation

Chemical Treatment Record

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 (2) as soon after treatment as possible, no later than 30 days
 (3) by October 1 if no treatment occurred

Completion of this form along with the permit satisfies the requirements of WDNR (NR 107) and DATCP (ATCP 29.21 and 29.22).

Permit Number SE-2020-52-6937	Water body Name (including ponds, e.g., Smith Pond) Waterford Waterway - Tichigan Lake / Fox River		
County Racine	Permit Holder Name (Customer Name) Waterford Waterway Management District		

Permit Holder Address 415 N Milwaukee St	City Waterford	State WI	Zip Code 53185
---	-------------------	-------------	-------------------

Treatment Information

Treatment Date (mm/dd/yyyy) 9/2/2020	Starting Time (24:00 hour) 09:00	Ending Time (24:00 hour) 15:30	Water Temp 76	<input type="checkbox"/> C <input checked="" type="checkbox"/> F	Ambient Air Temp 80	<input type="checkbox"/> C <input checked="" type="checkbox"/> F
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Wind Speed (mph) 5	Wind Direction West	Expected Duration of Chemical Residuals 5 days
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Adverse Conditions Noted (i.e., dead fish, spawning fish, algae bloom, etc.)

If adverse conditions noted, indicate corrective actions taken

Comments

Onsite Supervision by DATCP and/or DNR Staff <input type="radio"/> Yes <input checked="" type="radio"/> No	If Yes, Supervisor Name :
---	---------------------------

Mixing and Loading Site Location (if other than business site or from prepackaged retail container or applied with equipment with a total capacity of not more than 5 gallons liquid or 50 pounds dry)

Water User Restriction

No Restrictions Consuming Fish Pet/Livestock Water Irrigation (Crop)
 Swimming Drinking Water Irrigation Other:

Herbicide Treatment and Water Use Restrictions Signs Posted In Accordance With NR 107 and ATCP 29.22?

Applicator shall provide each customer with a free copy of each pesticide label used (if requested)

Applicator Information

Individual or Business Name Wisconsin Lake & Pond Resource, LLC	Telephone xxx -xxx-xxxx 920-872-2032 x
--	---

Street Address
N7828 Town Hall Rd

City Eldorad	State WI	ZIP Code 54932
-----------------	-------------	-------------------

Individuals Making or Supervising Pesticide Application	Last Name	First	Certification #	License #
	scharl	james	77803	224355
	lorge	nicholas	105360	471821

Name of Person Completing Form

Date: 9/2/2020

Aquatic Plant Management Herbicide Treatment Record

Form 3200-111 (R4/20)

Page 2 of 2

Site No	Property Name	Address / Fire No	Treated acreage	Permitted Acreage	Sensitive Area?	Latitude	Longitude
La...	varies	varies	12.10	42.80	<input type="checkbox"/>	42.7663	-88.2135

Herbicide Name	EPA Reg. No.	Amount Applied	Units	Application Concentration Rate (mg/l = ppm)
<u>Captain Liquid Copper Algaecide</u>	67690-9	10	gallons	0.111 ppm
<u>Clipper SC Aquatic Herbicide</u>	71368-114	2.5	gallons	0.125 ppm
<u>Tribune Herbicide</u>	100-1390	10	gallons	0.245 ppm

Other (not listed above) Other:

TS	SP	Site(s)	TS	SP	Site(s)	TS	SP	Site(s)
<input type="checkbox"/>	<input type="checkbox"/>	Cattail	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Flat-Stem Pondweed	<input type="checkbox"/>	<input type="checkbox"/>	Richardson Pondweed
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Chara	<input type="checkbox"/>	<input type="checkbox"/>	Floating-Leaf Pondweed	<input type="checkbox"/>	<input type="checkbox"/>	Robbins Pondweed
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Coontail	<input type="checkbox"/>	<input type="checkbox"/>	Illinois Pondweed	<input type="checkbox"/>	<input type="checkbox"/>	Sago Pondweed
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Curly-Leaf Pondweed	<input type="checkbox"/>	<input type="checkbox"/>	Large-Leaf Pondweed	<input type="checkbox"/>	<input type="checkbox"/>	Watershield
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Duckweed	<input type="checkbox"/>	<input type="checkbox"/>	Northern Milfoil	<input type="checkbox"/>	<input checked="" type="checkbox"/>	White Water Lily
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Elodea	<input type="checkbox"/>	<input type="checkbox"/>	Phragmites	<input type="checkbox"/>	<input type="checkbox"/>	Wild Celery
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Eurasian /hybrid Milfoil	<input type="checkbox"/>	<input type="checkbox"/>	Planktonic Algae	<input type="checkbox"/>	<input type="checkbox"/>	White-Stem Pondweed
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Filamentous Algae	<input type="checkbox"/>	<input type="checkbox"/>	Purple Loosestrife	<input type="checkbox"/>	<input type="checkbox"/>	

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Site Map

 File Attachment

Treatment Plan

 File Attachment

Fee Calculation

Chemical Treatment Record

No additional payment required for submitting treatment records.

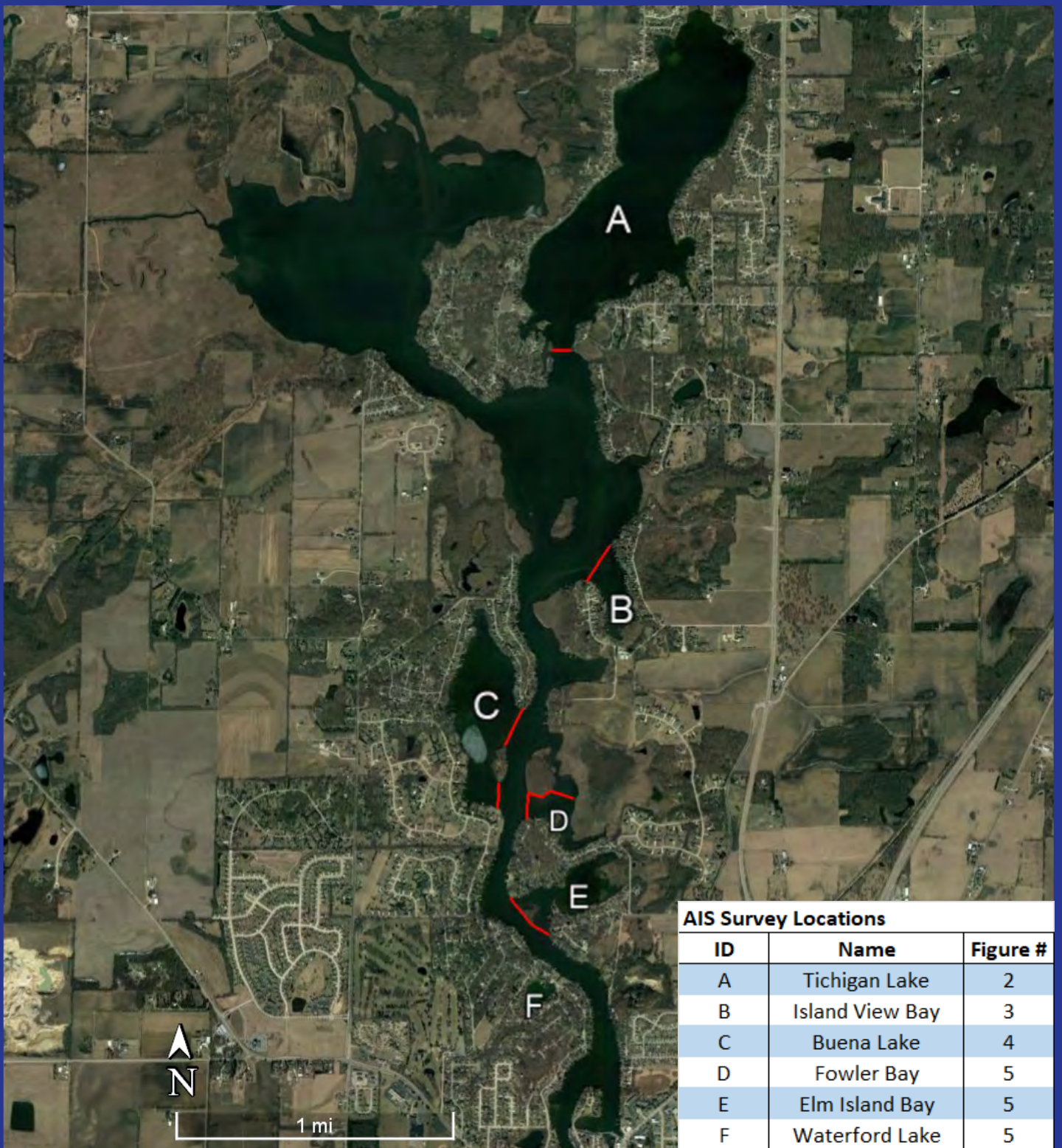


Lake & Pond Resource LLC

“Providing Professional Resources for Management of Your Lake or Pond”

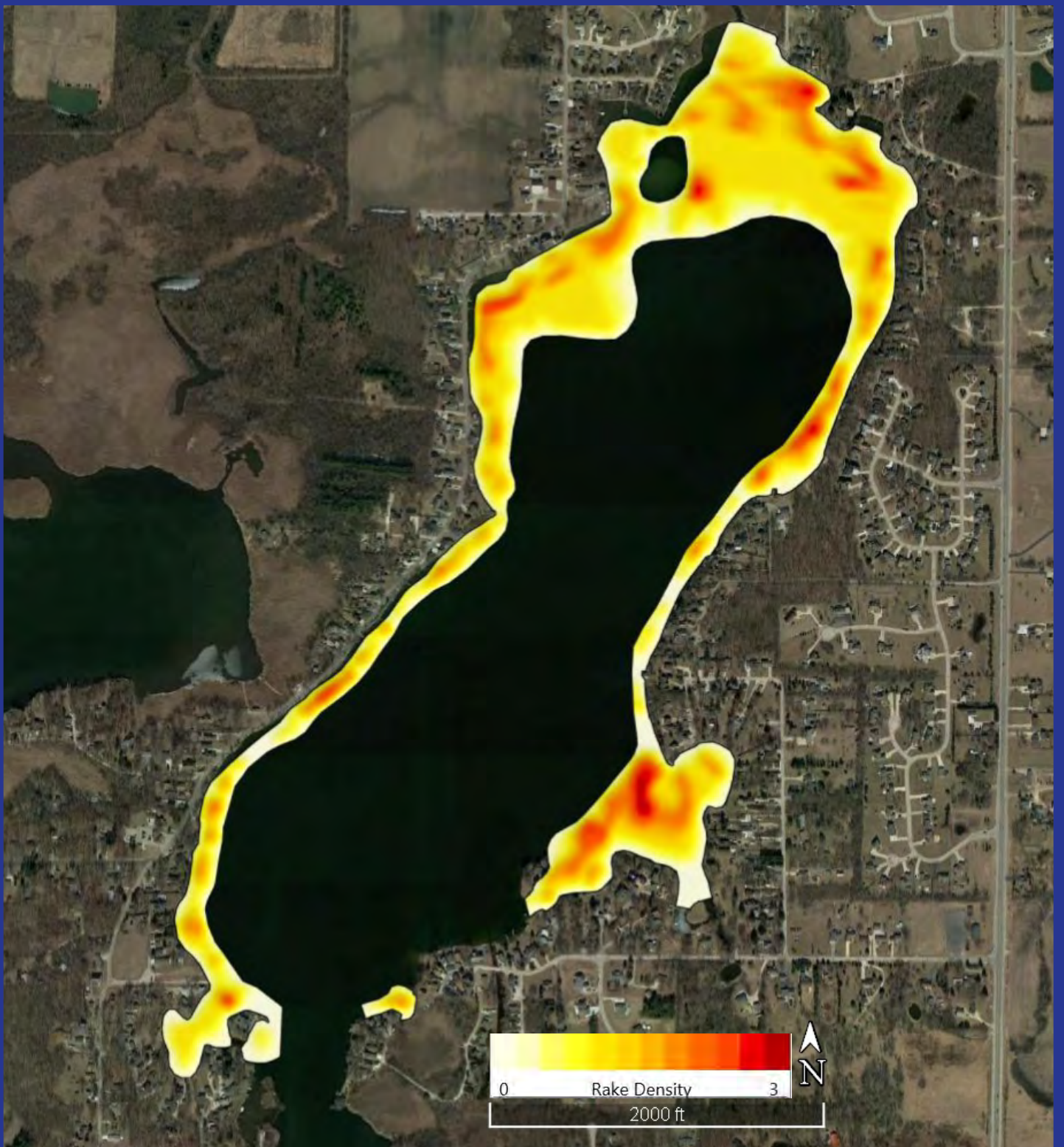
Professional Pond Management Products and Services
Aquatic Herbicide and Algaecide Applications
Lake Management Planning and Services
Pond Design and Development

Attachment B: Figures



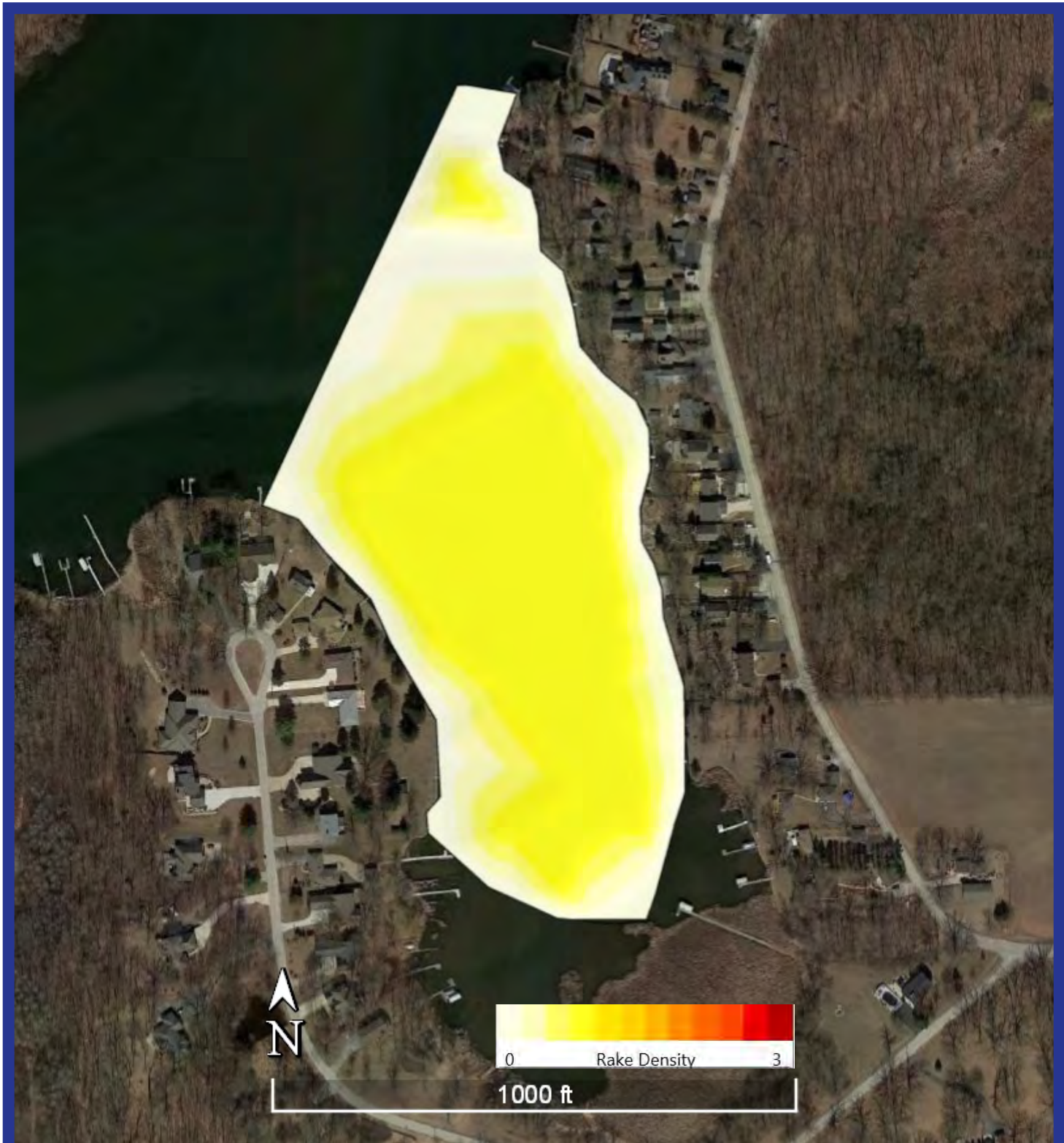
Waterford Waterway - AIS Survey Locations

Locations outside those indicated here were not directly surveyed for presence of AIS



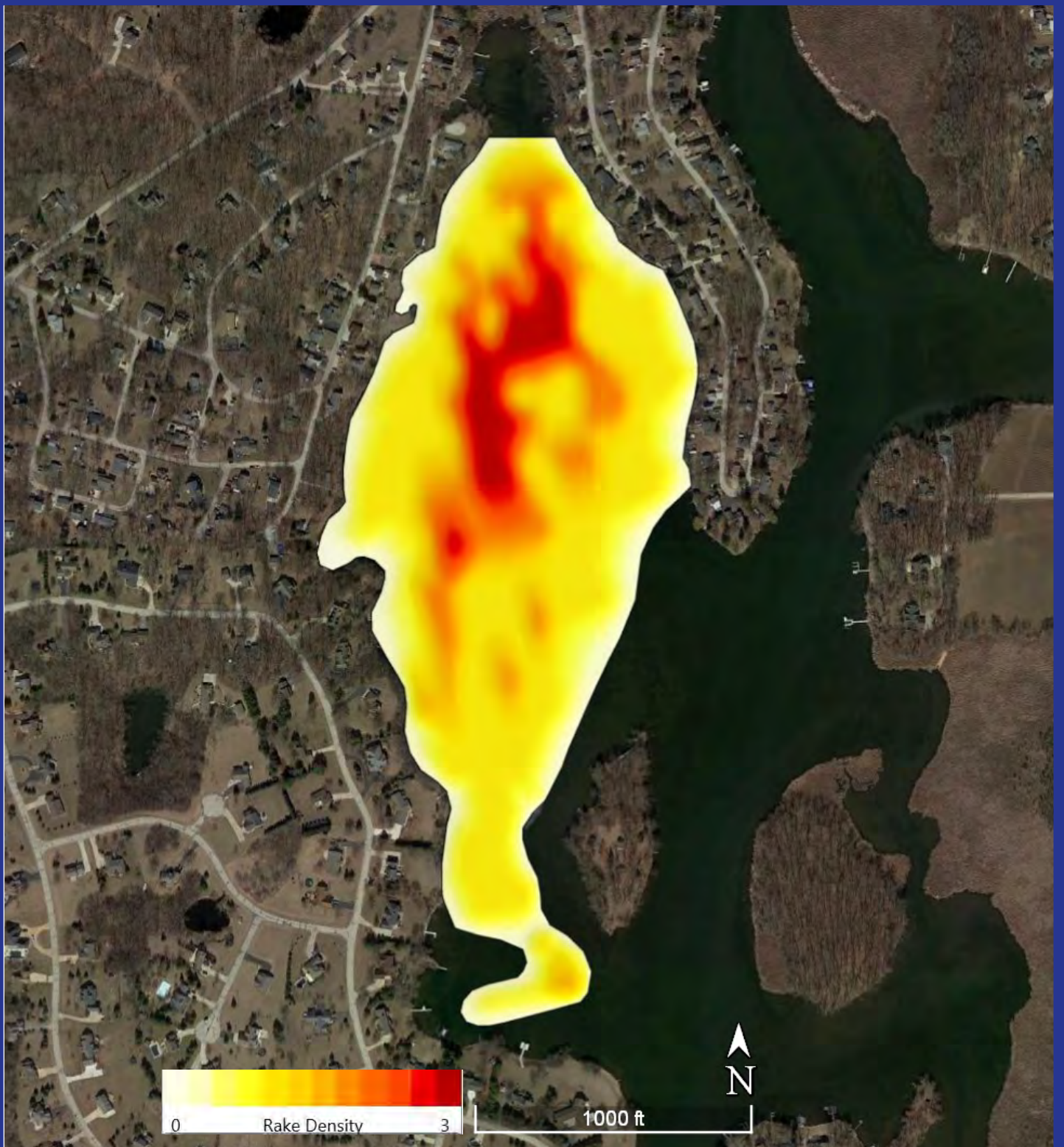
Tichigan Lake - Eurasian Watermilfoil Locations

Locations outside those indicated here were not directly surveyed for presence of AIS



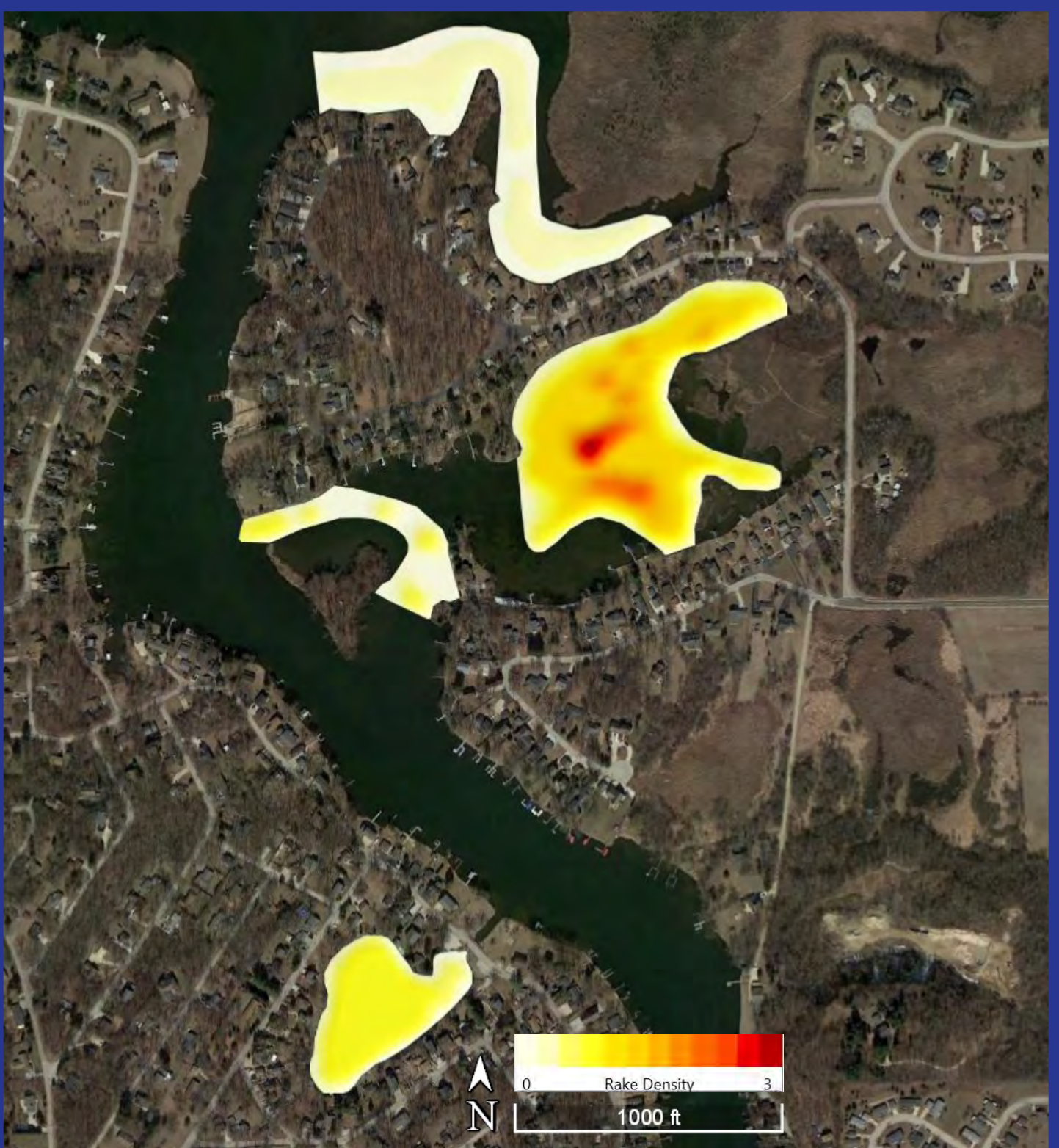
Island View Bay - Eurasian Watermilfoil Locations

Locations outside those indicated here were not directly surveyed for presence of AIS



Buena Lake - Eurasian Watermilfoil Locations

Locations outside those indicated here were not directly surveyed for presence of AIS



Fowler Bay, Elm Island Bay, & Waterford Lake Eurasian Watermilfoil Locations