



July 2, 2018

Bay-Lake Regional Planning Commission
425 S. Adams Street, Suite 201
Green Bay, WI 54301

Permit No. NE-2018-31-1275
Permit Fees: Received \$1270.00

Subject: 2018 Permit to Chemically Treat Invasive Emergent Plants

Dear Angela,

The Department has received and reviewed your application to chemically treat up to 1,000 acres of *Phragmites australis*, *Fallopia japonica*, *Polygonum cuspidatum*, and *Pastinaca sativa* in Kewaunee County and *Phragmites australis* in Brown County. Your permit application meets the minimum requirements by law and a permit is being issued with the following conditions.

Permit Conditions

1. The chemical treatment shall be performed in compliance with Wisconsin Administrative Code Chapter NR 107. Chemical treatment shall be performed in accordance with label directions and existing pesticide laws.
2. The permit holder shall notify the Department when an applicator has been selected and prior to treatment if a chemical other than the listed Habitat or AquaNeat are to be used.
3. The additional acreage of *Phragmites australis* treatment along the East River in Brown County (map attached) was added to the permit after it had been submitted and is granted as follows:
 - A. Allouez – 33.5 acres
 - B. Bellevue – 44.7 acres
 - C. Green Bay – 18.4 acres
4. The permit holder shall be responsible for posting signs within the treatment area as specified in NR 107.08(7).
5. The permit holder, per NR 107.08(8), shall submit an Aquatic Plant Management Treatment record after treatment.

If you have any questions, please feel free to contact me by phone at (920)-662-5489 or by email at Mary.Gansberg@wisconsin.gov.

Sincerely,

Mary Gansberg
Water Resource Management Specialist

CC: Holly Stegemann, Water Resource Management Specialist
George Protogere, Warden Supervisor Green Bay

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

Form 3200-004 (R 05/16)

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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 NE-2018-31-1275	Permit Expiration Date 12-1-2018
Waterbody # 20	Fee Received \$1270

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				Lake Address			
Name Bay-Lake Regional Planning Commission				Name			
Street Address				Street Address			
425 S. Adams Street, Suite 201							
City Green Bay		State WI	ZIP Code 54301	City		State	ZIP Code

Phone Number (include area code) Primary: (920) 448-2820 Secondary:	Email Address AngelaKA@baylakerpc.org
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Section II – Aquatic Plant Control Location

Waterbody to be Treated (waterbody where treatment area is located) BROWN-HS Kewaunee, Ahnapee, Red, E Twin, & W Twin rivers, Lk Michigan	Lake Surface Area acres	Estimated Surface Area that is 10 Feet or Less in Depth acres
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County Kewaunee	Section	Township N	Range OE OW	Name of Applicator or Firm To be determined by BLRPC bidding process; all applicable info
Latitude				Street or Route requires prior approval. MG
Longitude				will be submitted for review prior to beginning work

<ul style="list-style-type: none">• Is land <u>not</u> entirely owned by applicant? <input checked="" type="radio"/> Yes <input type="radio"/> No• Is there surface water discharge? <input checked="" type="radio"/> Yes <input type="radio"/> No• Does the waterbody have public access? <input checked="" type="radio"/> Yes <input type="radio"/> No If all are no: considered to be a private pond	City	State	ZIP Code
Adjacent Riparian Property Owner Names (attach sheets if necessary)	County	Phone Number (include area code)	

1. <u>See attached spreadsheet; permissions are still being finalized;</u>	Email Address
2. <u>updated spreadsheet will be submitted prior to beginning work</u>	
3. _____	Applicator Certification Number for Category 5 Aquatic Pesticide Application
4. _____	Business Location License Number (if applicable)
5. _____	Restricted Use Pesticide License Number (if applicable)
6. _____	
Name of Lake Property Owners' Association Representative or Lake District Representative (if none, please indicate) None	

Area(s) Proposed for Control:						Estimated Acreage	Average Depth	Calculated Volume
Treatment Length	Treatment Width							
1. 6,600 ft	X 6,600 ft	÷	43,560 ft ²	=	1,000 ac	X	1 ft	= 1,000 ac-ft
2. _____ ft	X _____ ft	÷	43,560 ft ²	=	_____ ac	X	_____ ft	= _____ ac-ft
3. _____ ft	X _____ ft	÷	43,560 ft ²	=	_____ ac	X	_____ ft	= _____ ac-ft
4. _____ ft	X _____ ft	÷	43,560 ft ²	=	_____ ac	X	_____ ft	= _____ ac-ft
5. _____ ft	X _____ ft	÷	43,560 ft ²	=	_____ ac	X	_____ ft	= _____ ac-ft
6. _____ ft	X _____ ft	÷	43,560 ft ²	=	_____ ac	X	_____ ft	= _____ ac-ft
7. _____ ft	X _____ ft	÷	43,560 ft ²	=	_____ ac	X	_____ ft	= _____ ac-ft
8. _____ ft	X _____ ft	÷	43,560 ft ²	=	_____ ac	X	_____ ft	= _____ ac-ft
Estimated Acreage Grand Total						1,000 ac	Calculated Volume Grand Total	1,000 ac-ft

estimated. MG

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Section II – Aquatic Plant Control Location (continued)

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. 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?

☒ Yes ☐ No

DNR Use: NHI Review? ☐ Yes ☐ No Describe:

Section III – Fees

- s. NR 107.11(1), Wis. Adm. Code, lists the conditions under which the permit fee is limited to the \$20 minimum charge.
- s. NR 107.11(4), Wis. Adm. Code, lists the uses that are exempt from permit requirements.
- 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: If proposed treatment is over 0.25 acre, calculate acreage fee:
(round up to nearest whole acre, to maximum of 50 acres.)

50 acres X \$25 per acre = \$ 1,250

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

Enter Acreage Fee (from above) \$ 1,250.00

Basic Permit Fee (non-refundable) \$ 20.00

Total Fee Enclosed \$ 1,270.00

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

Goal of Aquatic Plant Control:

- ☐ Maintain navigational 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 and stems growing above water surface, e.g. cattails, bulrushes)
- ☐ Floating water plants (majority of leaves floating on water surface, e.g., waterlilies, duckweed)
- ☐ Submerged water plants (leaves and stems below water surface, flowering parts may be exposed, e.g., milfoil, coontail)
- ☒ Other: Emerged invasive plants extending onto exposed lake bed, riverine wetlands, and adjacent upland

List Target Plants

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

Non-native Phragmites (*Phragmites australis*), Japanese knotweed (*Fallopia japonica* or *Polygonum cuspidatum*), and Wild parsnip (*Pastinaca sativa*)

Section V – Chemical Control

Alternatives to Chemical Control:

Feasible?

If No, Why Not?

1. Mechanical harvesting

☐ Yes ☒ No

Phragmites populations with the Green Bay and Upper Lake

2. Manual removal

☐ Yes ☒ No

Michigan basins are too expansive for non-chemical treatment

3. Sediment screens/covers

☐ Yes ☒ No

methods. In addition, Phragmites is not well contained by non-

4. Dredging

☐ Yes ☒ No

chemical means due to the longevity of its rhizome and stolon

5. Lake drawdown

☐ Yes ☒ No

systems. Finally, the expansive treatment area poses financial and

6. Nutrient controls in watershed

☐ Yes ☒ No

socio-economic constraints for other options such as burning.

7. Other: _____

☐ Yes ☐ No

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

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Section V – Chemical Control (continued)

If you checked yes to any of the alternatives listed above, please explain your decision to use chemical controls:

Full Trade Name of Proposed Chemical(s)

Habitat or another similar aquatic use approved preparation of an isopropylamine salt of Imazapyr (2-[4,5-dihydro-4-methyl-(1-methylethyl)-5-oxo-1H-imidazol-2-yl]-3-pyridinecarboxylic acid).

AquaNeat or another similar aquatic use approved formulation of a glyphosate-based herbicide.

Method of Application: Backpack sprayers; boom sprayers mounted to amphibious vehicle, ATV, or boat

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?

Is treatment area greater than 5% of surface area? ☐ Yes ☒ No

If yes, calculate whole lake concentration (in ppm). Refer to DNR Lake pages dnr.wi.gov/Lakes to answer the following:

Does the lake stratify? ☐ Yes ☐ No

If yes, calculate whole lake concentration using volume above thermocline.

If no, calculate whole lake concentration using total lake volume.

Whole Lake Concentration: _____ ppm

Note: Chemical fact sheets for aquatic pesticides used in Wisconsin are available from the Department of Natural Resources at the following link: dnr.wi.gov/Lakes/plants/factsheets/.

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 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 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.

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Section VI – Applicant Responsibilities and Certification (continued)

☒ 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

5/22/18

Date Signed

All portions of this permit, map and accompanying cover letter must be in possession of the chemical applicator at time of treatment. During treatment 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 the specific conditions contained in the permit cover letter.

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
☐ WPDES coverage not needed

☒ Yes – complete section VII with signature
*withdrew request for WPDES coverage.
MG*

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 ☐ No

If yes, identify the pollutant(s): Imazapyr, Glyphosate

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 ☐ No

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

Angela Kowalzek-Adrians

Printed Name

5/22/18

Date Signed

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WPDES Pesticide Pollutant Permit Application**

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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 2018.

Application fee received?

☒ Yes ☐ No

State of Wisconsin
Department of Natural Resources
For the Secretary

Advance notification of
treatment required?

☐ Yes ☒ No

By Mary Hunsburg
Regional Director or Designee

7-2-18
Date Signed

email 7-2-18
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 for judicial review.





