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|tlg1951 signed on 2025-04-11T14:49:42

Site or Project Name:	Crescent Lake 2025 Herbicide Treatment	
Site of Project Name.	The permit application will be saved automatically with this name	
Activity:	Chemical Control Application-Lake, River, Pond	
	Does the waterbody have:	
Fligibility	 More than one property owner? 	\odot Yes \bigcirc No
Eligibility: (All questions must be no for it to		\odot Yes \bigcirc No
be considered a private pond.)	Public access?	\odot Yes \bigcirc No

3200-004 Chemical Aquatic Control Application - Lake, River, Pond

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 competed 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: <u>http://dnr.wi.gov/files/pdf/forms/3200/3200-004A.pdf</u>
- 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 Information	
Organization	Crescent Lake District
Last Name:	Goldbach
First Name:	Terry
Mailing Address:	2704 BIBLE CAMP RD
City:	RHINELANDER
State:	<u>WI</u>
Zip Code:	54501
Email:	
Phone Number:	
(xxx-xxx-xxxx) Alternative Phone Number:	
(xxx-xxx-xxxx)	
Waterbody Address	
Last Name:	
First Name:	Terry
Street Address:	2704 BIBLE CAMP RD
City:	RHINELANDER
State:	<u>WI</u>
Zip Code:	54501
Email:	
Phone Number:	
(xxx-xxx-xxxx) Alternative Phone Number:	
(xxx-xxx-xxxx)	
Applicator	Aquatia Dialogista Inc
	Aquatic Biologists, Inc.
Applicator Certification #:	
Business Location License #:	22-00792-002/22
Restricted Use Pesticide #:	
	N4828 Highway 45 S.
	Fond Du Lac
State:	
Zip:	54937
	rlangjahr@aquaticbiologists.com
Phone Number: (xxx-xxx-xxx)	920-921-6827

Adjacent Riparian Property Own	ers				
NOTE: Phone and email address will not	be publicly viewable.				
Uploaded riparian owners to attachm			n is not applicable f		
Name	Address	5	Phone	Ema	il Address
Site Information - Complete					
Waterbody Containing Contr	ol Area(s)				
Waterbody Property	Owners Association	Crescent Lak	e District		
or Waterbody Distr	rict Representative :	None			
Water Body	y or Wetland Name:	Crescent Lake			
	Primary County:	Oneida			
	Latitude:	45.61669			
	Longitude:	-89.52408			
	Section:	08			
	Township:	36			
	Range:	08			
	Direction:	● E ○ W			
Wate	rbody Surface Area:	616	acres		
		200			

Estimated Surface area that is 10ft or less 200 acres

Proposed Control Area(s)

Area(s) Proposed for Co	ntrol:				
Site Name	Treatment	Treatment Width	Estimated Acreage	Average Depth	Calculated Volume
<u>(Optional)</u>	<u>Length</u>				
	0 ft. x	0 ÷ 43,560 ft. ²	= 28.12 ac	5.27 ft =	148.19 ac-ft
	ft	t.			
	0 ft. x	0 ÷ 43,560 ft. ²	= 4.95 ac	6.87 ft =	34.01 ac-ft
	ft	t.			
		Estimated Acreage	33.07 _{ac}	Calculated	182.20 ac-ft
		Grand Total		Volume Grand Total	

Is the area with in or adjacent to a sensitive area designated by the Department of Natural Resources. <u>More Information</u> O Yes O 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 - Lake, River, Pond 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.].

Treatment Type:

 \bullet Lake \bigcirc Pond \bigcirc Wetland \bigcirc Marina \bigcirc Other

Has a management plan been provided to the DNR? • Yes • No • Don't Know	If Yes, date approved of most current copy 11/25/2020	Link to Approved Plan:
		✓ Uploaded Plan copy as an Attachment
Does the proposed plant removal agree with the approved plant removal agree with the approved plant NO explain. Attach additional sheets if necessary	olan? • Yes No	

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		
🗌 Algae	Flowering Rush	Purple Loosestrife
Common/Glossy Buckthorn	Hybrid Cattail	Reed Canary Grass
🗌 Coontail	Hybrid Watermilfoil	🗌 Reed Manna Grass
Curly-Leaf Pondweed	Japanese Knotweed	Starry Stonewort
Duckweed	🗌 Naiad	Yellow Floating Heart
🗌 Elodea	Narrow-Leaf Cattail	Yellow Iris
 Eurasian Watermilfoil 	Phragmites	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 Propose	ed Chemical(s)		
🗌 Agristar 2,4-D Amine	🗌 Clipper	🗌 К-Теа	SCI-62
🗌 Algimycin PWF	🗌 Clipper SC	🗌 Littora	🗌 Sculpin G
🗌 Alligare 2,4-D	🗌 Current	Milestone	SeClear
Alligare Argos	🗌 Cutrine-Plus	🗌 Nautique	SeClear G
🗌 Alligare Diquat	🗌 Cutrine-Plus Granular	🗌 Navigate	Shoreklear-Plus
🗌 Alligare Ecomazapyr	🗌 Cutrine-Ultra	🗌 Navitrol	🗌 Shredder Amine
🗌 Alligare Glyphosate 5.4	🗌 DMA 4 IVM	🗌 Navitrol DPF	🗌 Sonar AS
🗌 Aqua Neat	🗌 Earthtec	🗌 Phycomycin SCP	🗌 Sonar Genesis
🗌 Aqua Star	🗌 Element 3A	🗌 Polaris	🗌 Sonar H4C
🗌 AquaPro	🗌 Flumioxazin 51% WDG	🗌 Polaris AC	🗌 Sonar PR
🗌 Aquashade	🗌 Formula F-30	🗌 Pond-Klear	🗌 Sonar Q
🗌 Aquashadow	🗌 Garlon 3A	ProcellaCOR EC	🗌 Sonar RTU
🗌 Aquastrike	🗌 Green Clean	🗌 Refuge	🗌 Sonar SRP
🗌 Aquathol K	🗌 Habitat	🗌 Renovate 3	SonarOne
🗌 Aquathol Super K	🗌 Harpoon	🗌 Renovate LZR	🗌 Stingray
🗌 Avast! SC	🗌 Harvester	🗌 Renovate LZR Max	Symmetry NXG
🗌 Captain	🗌 Havoc Amine	🗌 Renovate Max G	🗌 Touchdown Pro
🗌 Captain XTR	🗌 Hydrothol 191	🗌 Renovate OTF	🗌 Tribune
🗌 Chinook	🗌 Hydrothol Granular	🗌 Reward	🗌 Trycera
🗌 Clearcast	🗌 Komeen	🗌 Rodeo	🗌 Weedar 64
🗌 Clearigate	Komeen Crystal	🗌 Roundup Custom	Weedestroy AM-40
Other Proposed Chemical(s):			

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

What were the results of the treatment?

Very successful 2022,2021,2020,2019	

Method of Application: Injection

Other Method of Application

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	🔾 Yes 🖲 No	Would cause fragmentation and further spread of EWM plants
2. Manual removal	🔾 Yes 🖲 No	Area too large
3. Sediment screens/covers	🔾 Yes 🖲 No	Cost prohibitive
4. Dredging	🔾 Yes 🖲 No	n/a
5. Waterbody drawdown	🔾 Yes 🖲 No	n/a
6. Nutrient controls in watershed	🔾 Yes 🖲 No	n/a
7. Other:	\bigcirc Yes \bigcirc No	

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

Waterbody concentration calculations (in ppm.) Refer to DNR Waterbody pages <u>http://dnr.wi.gov/lakes</u> and <u>https://dnr.wisconsin.gov/topic/lakes/plants/forms</u> to answer the following:

Does the waterbody stratify? \odot Yes \bigcirc No

- If yes, calculate whole waterbody concentration using volume above thermocline.
- If no, calculate whole waterbody concentration using total lake value

Herbicide Name	Other Herbicide	E PA Reg. No.	Whole Waterbody Concentration (mg/l = ppm)
ProcellaCOR EC		67690-80	182

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

 \bigcirc Yes - complete section VII with signature.

• No

- Already have WPDES
- \bigcirc 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	III File Attachment	2025 Treatment Zone List DNR.xisx
Public Notice	File Attachment	2025 Newspaper Notice Documention.pdf
Large Scale Worksheet	File Attachment	2025 DNR Large Scale Chemical Treatment Form32004A.pdf
Site Map	III File Attachment	2025 Chemical Treatment Map.jpg
Site Map	I File Attachment	2025 ProcellaCOR DNR Treatment Description.docx
Site Map	File Attachment	2024 August Meander Survey Hwy 8.jpg
Site Map	I File Attachment	2024 Whole Lake Only Map.jpg
Site Map	III File Attachment	2025 Chemical Treatment Area Data.xlsx
Lake Management Plan	I File Attachment	CrescentLMP_DRAFT_FINAL112520202859.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 = \$

33.07

If proposed treatment is less than 0.25 acre, acreage fee is \$0	\$850.00	
Basic Permit Fee (non-refundable)	\$20.00	
Total Fee	\$870	
Payment Information		
Invoice Number: WP-00052636		

Payment Confirmation Number: WS2WT3012339964

Amount Paid: \$870

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 that the above information is true and correct and that copies of the application shall be provided to all affected property owners promptly 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 hereby certify that the above information is true and correct and that copies of this submittal shall be provided to the appropriate parties named in the contact section and that the conditions of the permit and pesticide use

will be adhered to.

i:0#.f|wamsmembership|tlg1951 signed on 2025-04