## **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 Si	ubmitted by: i:0#.f wamsmembership blumedl signed on 2025-03-14T13:10:41
Site or Project Name:	2025 Upper Eau Claire Lake CLP DASH Removal Project
Site of Froject Name.	The permit application will be saved automatically with this name
Activity:	Mechanical Control Application
Enter previous years permit	information below to import Contact Information for new application
(Optional) or pay Renewal F	ee
Please Select One:	New application

#### 3200-113 Mechanical - Manual Plant Control Application

Permit ID #:

- Complete all applicable forms
- Attach a water body map that shows the harvest location(s), harvest dimensions and riparian landowners.

O Pay Renewal Fee

- Certify that a copy of the application has been provided to any affected property owner's association/district and to landowners adjacent to treatment area.
- Pay fee online.
- Sign and Submit form.

<b>Contact Information</b>		
Applicant Information		
Organization	Town of Barnes	
Last Name:	Hufnagle	
First Name:	Kari	
Mailing Address:	3360 Cty Hwy N	
City:	Barnes	
State:	<u>WI</u>	
Zip Code:	54873	
Email:		
Phone Number: (xxx-xxx-xxxx)		
Alternative Phone Number:		
(xxx-xxxx-xxxx)		
Waterbody Address		
Last Name:		
First Name:		
Street Address:	50575 Peninsula Rd	
City:	Barnes	
State:	<u>WI</u>	
Zip Code:	54873	
Email:		
Phone Number: (xxx-xxx-xxxx)		
Alternative Phone Number:		
(xxx-xxx-xxxx)		
Removal Firm Information	Town of Dames	
	Town of Barnes	
Address:	3360 Cty Hwy N	
City:	Barnes	
State:	<u>WI</u>	
Zip:	54873	
	cneff86@gmail.com	
Phone Number: (xxx-xxx-xxxx)	715-795-3227	

Adjacent Riparian Property Owners or Other Individuals Sponsoring Removal

✓ Uploaded riparian owners to attachment tab	Riparian Ow	ners Information	is not applicable for this a	pplication
Name	Address		Phone	Email Address
Site Information - Complete				
<b>Waterbody Containing Control Area</b> (	s)			
Waterbody Property Owners A	Association			
or Waterbody District Repre	sentative :	None		
Water Body or Wetl	and Name:	Upper Eau Clair	e Lake	
Prima	ry County:	Bayfield		
	Latitude:	46.311		
	Longitude:	-91.4753		
	Section:	10		
	Township:	44		
	Range:	09		
	Direction:	○ E		
Waterbody Su	rface Area:	1,024	acres	
Estimated Surface area that is	10ft or less	392	acres	
Proposed Control Area(s)				
Length of project area 0 ft. x Shoreline or area	a width 0 f	t. /43,560= 6.250	Estimated Acreage	Avg. Depth 9.00 ft.

TOTAL ESTIMATED ACREAGE 6.25

State of Wisconsin Department of Natural Resources PO Box 7921, Madison WI 53707-7921 dnr.wi.gov

# Aquatic Plant Control Mechanical / Manual Permit Application

Form 3200-113 (R 10/16)

**Notice**: Pursuant to s. 23.24, Wis. Stats., the information requested on this form is required by the Department of Natural Resources (DNR) to permit aquatic plant control mechanical and/or manual application. Failure to complete and submit this form will result in no permit being issued. Personally identifiable information collected will be used for program administration and may be made available to requesters to the extent required under Wisconsin's Open Records law [ss. 19.31 - 19.39, Wis. Stats.].

Has a management plan been provided to the DNR?	If Yes, date approved	d of most curr	rent copy		Link	to Approved	Plan:	
● Yes ○ No ○ Don't Know	10/4/2023				htt	ps://towr	ofbarnesv	vi.gov/documen
						Uploaded Pla	an copy as an	Attachment
Does the proposed plant removal agree with the approved pl	an? • Yes · No							
If NO, explain, Attach additional sheets if necessary.								
Is this area within or adjacent to a Sensitive Area designated	by the Wisconsin Department	of Natural Re	sources?					
● Yes ○ No ○ Don't Know If yes, list	t sites:							
West Central Bay, Outlet Bay, Southwest Bay,	East of Three-in-One I	sland						
		<del></del>	1.					<del></del>
Name of 1st Plant Disposal Site		1/4 1/4	1/4	Section	Township	Range	O E	County Bayfield
Town of Barnes Brush Dump		⊣ <u>"</u>	<del>"</del>	34	45 N	09	● w	==,=
Name of 2nd Plant Disposal Site (if applicable)		1/4 1/4	1/4	Section	Township	Range	○ E	County
		<u></u>	<u> </u>			N	Ow	
Section IV: Methods What mechanical or manual methods to remo	ve plants are proposed	d? (check a	ll that a	vlan)				
☐ Mechanical harvesting ☐ Raki	· · · · · · · · · · · · · · · · · · ·	Other (spec						
Hand Pulling Cutt		Alum	.,					
If alum is proposed, has a plan been developed		es, please	include	the plan v	vith this ar	plication.	,	
Please explain why you selected the proposed	•			•		•		
Section VI: Reasons for Aquatic Plant	Romoval							
Purpose of Aquatic Plant Removal:	Removal	Nuis	ance Ca	used By:				
☐ Maintain navigational channel for commor	ı use			nt water pl	ants			
☐ Maintain private boat access			_	gent water				
Maintain private access for fishing		□ F	- -loating	water plar	nts			
Improve Swimming			Other					
✓ Other Removal of AIS								
Name of plants, if known								
Curly-leaf nondweed								

Section VII: Integrated Pest Management (Alternatives Considered)

1. Chemical	O O	O
	○ Yes <b>●</b> No	○ Yes ● No
2. Dredging	○ Yes ● No	○ Yes <b>⑤</b> No
3. Drawdown	○ Yes ● No	○ Yes ● No
4. Nutrient controls in watershed	◯ Yes ● No	○ Yes ● No
5. Nutrient controls on property	● Yes ○ No	Yes  No
6. Other	● Yes ○ No	● Yes ○ No
<b>Note</b> : Consider feasibility of alternate application but also helps you evalu		ormation not only helps the department make a decision on this ant management.
Describe the level of success for altern	native methods previously used:	
Describe the level of success for altern 1. Chemical	native methods previously used:	
	native methods previously used:	
1. Chemical	native methods previously used:	
<ol> <li>Chemical</li> <li>Dredging</li> </ol>	native methods previously used:	
Dredging     Drawdown		Lakes Area support shoreland and habitat improvement projects on the l

### **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

2025 Upper Eau Claire Property Owners List.pdf

Site Map

File Attachment

2025 Upper Eau Claire Lake CLP DASH Removal Project.pdf

#### **Fee Calculation**

Mechanical Removal

Fees are not refundable and are calculated as follows:

- Single riparian area, one property owner, less than one acre ...... \$30.00
- Multiple riparian areas, offshore control areas, multiple riparian properties, one acre or greater \$30/acre (round up to nearest whole acre) If proposed removal acre is greater than 10 acres fee caps at \$300

Acreage: 6.25
Acreage Fee: \$210
Total Fee: \$210

#### **Payment Information**

Invoice Number: WP-00051882

**Payment Confirmation Number:** WS2WT3012261469

**Amount Paid: \$210** 

#### 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.
- 2. The applicant understands that the Department of Natural Resources may require supervision of any aquatic plant management project involving removal. Supervision may include inspection of the proposed treatment area and/or equipment, before, during, or after removal. The applicant is required to notify the regional office 4 working days in advance of each anticipated date of plant removal with the date, time, location and size of plant removal unless the Department waives this requirement. The advance notification may be specified in your permit.
- 3. The applicant agrees to inform all operators of harvesting equipment of the conditions and terms of this permit and to insure that all operators understand and abide by those terms and conditions.
- 4. The applicant agrees to comply with all terms and conditions of this permit, if used, as well as applicable Wisconsin Administrative Rules. The required fee is attached.
- 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 <a href="http://dnr.wi.gov/topic/invasives/disinfection.html">http://dnr.wi.gov/topic/invasives/disinfection.html</a>

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).

- 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|blumed|signed on 2025-0.

✓ 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.