

Document Number:	Note: COMPLETE ALL ITEMS IN BLACK INK	
<h2 style="margin: 0;">Dunn County</h2> <h1 style="margin: 0;">Holding Tank Maintenance and Monitoring Agreement</h1> <p style="margin: 0;">(To be submitted with the State Sanitary Permit application)</p>		
DUNN COUNTY	Plan ID Number:	
Parcel ID Number:	Agreement Date:	
Governmental (Township) Unit:	Holding Tank Owner:	ENVIRONMENTAL SERVICES Dunn County Zoning Office 3001 US Hwy 12E, Suite 240 Menomonie, WI 54751

We acknowledge that the agreement is made between the governmental (township) unit and the holding tank owner regarding the installation of a holding tank on the following property:

- *The owner agrees to maintain the holding tank at all times so as not to create a human health hazard or nuisance.*
- *The owner agrees to ensure the operation and maintenance of the holding tank in accordance with Chapter SPS 383, Wisconsin Administrative Code, the management plan as submitted under Chapter SPS 383.54(1), Wis. Adm. Code, and s. 6.9.01, Dunn County Zoning Ordinance.*
- *The owner agrees to pay all costs incurred by the governmental unit for inspection, hauling, or otherwise servicing and maintaining the holding tank to prevent or abate any human health hazard caused by the holding tank.*
- *The owner agrees to notify the Dunn County Planning and Zoning Department within 10 days of any maintenance or management activity on the holding tank. (Pumping events may be reported by the contracted pumper per the servicing contract.)*
- *The owner agrees to allow access to the holding tank to any Dunn County Zoning Office employee or representative to inspect the construction, operation, or maintenance of the system.*
- *The agreement shall be binding upon the owner, the heirs of the owner, and assignees of the owner. The Dunn County Register of Deeds shall record the document.*

Name of governmental (Township) official	Title	Signature of governmental (Township) official
Name owner	Signature of owner (Notarized)	Date

Subscribed and sworn to before me on this date: _____

State of Wisconsin)
Dunn County) SS

Notary Signature _____

Notary Name (Print) _____ Notary Public
 _____ County, Wisconsin

My commission expires: _____