

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 ND-2016-49-670	Waterbody Name (including ponds, e.g., Smith Pond) Long Trade LAKE		
County Burnett	Permit Holder Name (Customer Name) RTLIA		
Permit Holder Address 2870 218th St	City Cushing	State WI	ZIP Code 54006

Treatment Information

Treatment Date (mm/dd/yyyy) 5/19/2016	Starting Time (24 hr) 0730	Ending Time (24 hr) 1030	Water Temp (°C) 58	Ambient Air Temp (°C) 60
Wind Speed (mph) 0-3	Wind Direction S	Expected Duration of Chemical Residuals 24 hrs		

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

fish spawning

If adverse conditions noted, indicate corrective actions taken

Onsite Supervision Present? 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)

Site

Herbicide Treatment and Water Use Restrictions Signs Posted In Accordance With NR 107? Yes No

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

Applicator Information

Individual or Business Name Northern Aquatic Services	Telephone Number 715 495 5252		
Street Address 1061 240th St	City Dresser	State WI	ZIP Code 54009
Individuals Making Pesticide Application:	Last Name DRESSE	First Dale	Certification # 061742
	Last Name	First	Certification #
	Last Name	First	Certification #
Name of Person Completing Form Dale	Signature <i>Dale Dresser</i>	Date Signed 5/19	DNR Use Only Date Received

