

## Wisconsin Department of Natural Resources SWIMS Project Summary

### General Project Information

**Project ID:** AEPP78524

**Name:** TIE AREA LAKES ASSN: T.I.E. Lakes Invasive Species Management Plan

**Type:** Aquatic Invasives Grant

**Subtype:** Aquatic Invasives Education

**Status:** ACTIVE

**Start Date:** 3/15/2024

**End Date:** 12/31/2025

**Purpose:** The Thunder-Island-Eagle Lakes Association (TIE) is sponsoring a project to update the Aquatic Plant Management (APM) Plan for Thunder, Eagle, and Island Lakes.

Activities: 1) Conduct a point-intercept survey on Thunder, Eagle, and Island Lakes; 2) Conduct genetic testing of Eurasian watermilfoil (EWM) in Thunder Lake; 3) Identify and engage stakeholders by conducting a survey and holding two public meetings; 4) Development of an APM Plan with an adaptive management and integrated pest management approach.

Deliverables: 1) All data collected; 2) agendas and minutes for planning meetings; 3) an APM Plan that evaluates available management options.

Conditions: 1) Enter all data into SWIMS database under the grant project number. 2) Draft user survey questions to be reviewed and approved by DNR Social Scientist before distribution or use. 3) WDNR\2019s Aquatic Plant Management in Wisconsin guidance shall be followed for aquatic plant monitoring and aquatic plant management plan development. 4) Point intercept surveys shall follow Recommended Baseline Monitoring of Aquatic Plants in Wisconsin: Sampling Design, Field and Laboratory Procedures, Data Entry and Analysis, and Applications, publication number PUB-SS-1068. Submit electronic point intercept data to this email address: DNRBaselineAquaticPlants@wisconsin.gov

This scope summarizes details provided in the application and does not negate tasks and/or deliverables described therein. Data, reports, surveys, and supporting information, including photos, maps and GIS data, must be submitted to the DNR Biologist in electronic format and in any other format they specify.

If a consultant provides a final report, it is recommended that the Grantee provide the DNR Biologist with a draft for comment on report adequacy prior to making a final payment to the consultant. Include electronic copy of the final report along with or prior to submission of grantee's final payment request.

**Objective:**

**Comments:** Grantee is TIE AREA LAKES ASSN

**Outcome:**

**Study Design:**

**QA Measures:**

### People

| Name | Role | Status | Start Date | End Date | Organization | Comments |
|------|------|--------|------------|----------|--------------|----------|
|------|------|--------|------------|----------|--------------|----------|

### Project Statuses

| Date | Reported By | Status | Comments |
|------|-------------|--------|----------|
|------|-------------|--------|----------|

### Actions

| Action        | Detailed Description    | Start Date | End Date   | Status   |
|---------------|-------------------------|------------|------------|----------|
| Grant Awarded | Grant AEPP78524 awarded | 3/15/2024  | 12/31/2025 | COMPLETE |

## Wisconsin Department of Natural Resources SWIMS Project Summary

### Monitoring Stations

| Station ID | Name | Comments |
|------------|------|----------|
|------------|------|----------|

### Assessment Units

| WBIC   | Segment | Local Name          | Official Name       |
|--------|---------|---------------------|---------------------|
| 500200 | 1       | Eagle Lake          | Eagle Lake          |
| 501400 | 1       | Island Lake         | Island Lake         |
| 533500 | 1       | Thunder Lake Outlet | Thunder Lake Outlet |
| 533600 | 1       | Thunder Lake        | Thunder Lake        |

### Lab Account Codes

| Account Code | Description | Start Date | End Date |
|--------------|-------------|------------|----------|
|--------------|-------------|------------|----------|

### Forms

| Form Code | Form Name |
|-----------|-----------|
|-----------|-----------|

### Methods

| Method Code | Method Description |
|-------------|--------------------|
|-------------|--------------------|

### Fieldwork Events

| Start Date | Status | Field ID | Station ID | Station Name |
|------------|--------|----------|------------|--------------|
|------------|--------|----------|------------|--------------|

### Documents

| Title | Description | Author | Published | Comments |
|-------|-------------|--------|-----------|----------|
|-------|-------------|--------|-----------|----------|

### Budget

#### Combined Budgets:

Combined WSLH:

Combined Total:                   \$0.00

### Funding

| Organization | Source | Type | Amount | Start Date | End Date |
|--------------|--------|------|--------|------------|----------|
|--------------|--------|------|--------|------------|----------|

8/28/2024

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