

AFFIDAVIT FOR TEMPORARY HOLDING TANK

As the owner(s) of the property described, I/We _____ make application for a sanitary permit for the purpose of installing a holding tank(s) to be used on a temporary basis only. An approved privately owned wastewater treatment system will be installed to replace the holding tank(s) as detailed below.

Owner(s): _____

Mailing address: _____

Legal Description : _____

Return to: Portage County Zoning/
Onsite Waste Section

Lot No. ____ of CSM _____ /Subdivision _____

Parcel No: _____

Town of _____, Portage County, WI

As an inducement to the County of Portage to issue a sanitary permit for the above described premises, I/we hereby, agree and bind myself/ourselves as follows:

1. It is agreed that the property owner(s) shall install a system in fill or some other type of Privately Owned Wastewater Treatment System (POWTS) other than holding tanks as a permanent treatment system.
2. The POWTS required to replace the temporary holding tank(s) will be installed within three months after either the temporary holding tank(s) have been installed and/or the successful completion of groundwater monitoring as outlined in SPS 383 of the Wisconsin Administrative Code, if required. The deadline, which occurs first shall take precedent. At the discretion of the zoning administrator or their agent, this deadline may be changed.
3. The property owner is responsible for obtaining all of the required approvals and permits before construction may commence.

Owner

Date

Owner

Date

STATE OF WISCONSIN:
PERSONALLY CAME BEFORE ME THIS _____ DAY OF _____, 201__.

THE ABOVE NAMED _____, to me known to be the person(s) who executed the foregoing instrument and acknowledged the same.

SEAL REQUIRED

Notary Public
My Commission Expires: _____

This instrument drafted by: _____

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