

RACINE COUNTY DEVELOPMENT SERVICES

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PRIVATE ONSITE WASTEWATER TREATMENT SYSTEM (POWTS) MAINTENANCE AGREEMENT

Owner's Name _____ Parcel Id. # _____
Mailing _____ Site _____
Address _____ Address _____
_____ Zip _____ _____ Zip _____

Phone (H) _____ (W) _____ # of Bedrooms _____ or Design Flow (gpd) _____

Maximum time interval between surface discharge inspection and maintenance check/pumping _____

Racine County administers a maintenance program as required by the Wisconsin Department of Safety and Professional Services. The owner of a POWTS shall be responsible for ensuring that the operation and maintenance of the POWTS occurs in accordance with County regulations, ch. SPS 383, WAC, and any required management plan. Improper use and maintenance of a POWTS could result in its premature failure. Proper use, maintenance and septic tank pumping can help prevent sludge and scum from sealing the absorption area and should extend the life of the system considerably. The time interval listed above is the maximum amount of time between septic tank maintenance checks; the tank(s) can be checked or pumped more often if desired.

Avoid placing the following items in building drains that go to the POWTS as there is the potential that they could adversely affect the way the septic tank as well as the waste disposal system functions:

- Clear water from sump pumps
- Grease, oil and fat
- Septic tank cleaners
- Water softener discharges
- Chemicals such as lye, acid, and drain cleaners
- Disposable diapers and sanitary napkins
- Paper other than toilet tissue
- Garbage, bones, fabrics, cigarette butts, etc.

The County requires that at least once every 3 years the POWTS be visually inspected for effluent ponding on the ground surface and septic tank(s) be checked, and pumped by a licensed septage hauler if more than 1/3 full of sludge and scum (solids and greases). The system owner will be sent a certification form reminding of the maintenance check at least 30 days prior to the due date. The owner is responsible for obtaining maintenance and showing proof by submitting a completed certification form and required maintenance program fee to the Development Services office. The form must be signed by a Wisconsin licensed master plumber, journeyman plumber, restricted-service plumber, septage hauler, POWTS inspector, or POWTS maintainer and signify that the system was visually inspected, and that after inspection (and pumping, if necessary) the treatment tank is less than 1/3 full of sludge and scum. Sanitary Permits issued after 7/1/00 require implementation of a POWTS management plan, and the owner is responsible for complying with maintenance requirements according to listed time intervals.

I, the undersigned, am an owner of the above referenced property, have read the above information and agree to maintain the POWTS in accordance with Chapter 19, Racine County Code of Ordinances; ch. SPS 383, WAC; and any required and approved management plan. I will forward proof of compliance and the County fee required to administer this program, when requested by the County or State. Furthermore, I understand that this Agreement is to be transferable to all subsequent owners of this property and I will be responsible for providing written notification of the maintenance program to the buyer.

Owner's Signature

Date