

St. Croix County
Occupancy Affidavit/Loads & Flows

Name – (Owner) Typed or printed

He/she is the owner/part owner of the following parcel of land located in St. Croix County, Wisconsin, with their deed or document of ownership interest recorded as Document Number _____ St. Croix County Register of Deeds Office.

This property is described as follows (include lot no. and subdivision/CSM or detailed legal description):

Recording Area

Name and Return Address

OR:

() See attached deed copy for legal descriptions

Parcel Identification Number (PIN)

As owner of the above-described property, I acknowledge that a Private On-site Wastewater Treatment System (POWTS) serving the primary residence is sized for _____ bedroom(s) with a design wastewater flow of _____ gallons/day (DWF is based on 150 gpd/bedroom @ 2 persons per bedroom). A maximum of _____ occupants are permitted; if the number of occupants exceeds the maximum for POWTS design, the system may be undersized to accommodate increased wastewater flows and/or contaminant loads and may be subject to premature failure and may require modification of the POWTS. I also acknowledge that I will make this information available to any future parties interested in purchasing this property.

Dated this _____ day of _____, _____.

* _____

* _____

* _____

* _____

AUTHENTICATION

Signature(s) _____

authenticated this _____ day of _____, _____

* _____

TITLE: MEMBER STATE BAR OF WISCONSIN

(If not, _____
authorized by § 706.06, Wis. Stats.)

THIS INSTRUMENT WAS DRAFTED BY:

(Signatures may be authenticated or acknowledged. Both are not necessary.)

ACKNOWLEDGMENT

STATE OF WISCONSIN)

)ss.

St. Croix County.

)

Personally came before me this _____ day of _____, _____
the above named

to me known to be the
person(s) who executed the foregoing instrument and acknowledge the
same.

* _____

Notary Public, State of Wisconsin

My Commission is permanent. If not, state expiration date:

Date: _____