

HOLDING TANK AGREEMENT

This agreement is made between the governmental unit and holding tank owner(s)

PIN#:	Sanitary Permit #:(to be filled in by Gov. Agent)
Agreement Date: (same date of notary)	Holding Tank Owner(s) (print or type):
Required Information	<p>We acknowledge that application is being made for the installation of (a) holding tank(s) on the following property in Lincoln County, State of Wisconsin:</p> <p>Section: _____ Township: _____ N Range: _____ E</p> <p>Government Lot: _____ OR Quarter/Quarter: _____ 1/4 _____ 1/4</p> <p>(circle one) Town / City of _____</p>
If Applicable	<p>CSM Number: _____ Lot(s): _____ Block: _____</p> <p>CSM Recorded in Vol: _____ Page: _____ Doc. Number _____</p> <p>Subdivision Name: _____</p> <p>(Subdivision Continued) Lot(s): _____ Block: _____</p>
<p>Return to:</p> <p>Lincoln County Land Services</p>	

As an inducement to **Lincoln County** to issue a sanitary permit for the above described property, we agree to the following:

1. To conform to all applicable requirements of SPS 383, Wis. Adm. Code relating to holding tanks. If the owner fails to have the holding tank properly serviced in response to orders issued by Lincoln County to prevent or abate a human health hazard as described in §254.59, Stats., the governmental unit may enter upon the property and service the tank or cause to have the tank to be serviced and charge the owner by placing the charges on the tax bill as a special assessment for current services rendered. The charges will be assessed as prescribed by §66.60, Stats.
2. To pay all charges and cost incurred by the governmental unit for inspection, pumping, hauling, or otherwise servicing and maintaining the holding tank in such a manner as to prevent or abate any human health hazard caused by the holding tank. The governmental unit shall notify the owner of any costs which shall be paid by the owner within thirty (30) days from the date of notice. In the event the owner does not pay the costs within thirty (30) days, the owner specifically agrees that all the costs and charges may be placed on the tax roll as a special assessment for the abatement of a human health hazard, and the tax shall be collected as provided by the law.
3. Except as provided by §281.48(3)(d) Stats., agrees to contract with a person who is licensed under §281.48(3)(a), Stats. To have the holding tank serviced and to file a copy of the contract or the owner's registration with the governmental unit. The owner further agrees to file a copy of any changes to the services contract, or a copy of a new service contract, with the governmental unit within ten (10) business days from the date of change to the service contract.
4. To contract with a person licensed under §281.48(3)(a), Stats., who shall submit holding tank servicing reports to the county in accordance with SPS 383.55. Wis. Adm. Code. In the case of exception under §281.48(3)(d). Stats., the owner shall submit the reports to the county. The governmental unit or county may enter upon the property to investigate the condition of the holding tank when pumping reports may indicate that the holding tank is not being properly maintained.
5. This agreement will remain in effect only until Lincoln County certifies that the property is served by either a municipal sewer or a private sewage system other than a holding tank that complies with SPS 383, Wis. Adm. Code. In addition, this agreement may be canceled by executing and recording said certification with reference to this agreement in such manner which will permit the existence of the certification to be determined by reference to the property.
6. This agreement shall be binding upon the owner, the heirs of the owner, and assignees of the owner. The agreement shall be recorded by the register of deeds in a manner which will permit the existence of the agreement to be determined by reference to the property where the holding tank is installed.

Owner's Name(s) – Please print:	Subscribed & sworn to before me on this date:	Governmental Unit Official Name and Official Title – Please print: Jeffrey D. Selgren Lincoln County Onsite Waste & Land Use Specialist
	Notary Public (Printed or typed)	
Notarized Owner(s) Signature(s):	Notary Public (Signature)	Governmental Unit Official Signature <u>AND</u> Date signed:
	My Commission Expires:	

Drafted by: _____

(Name of person completing form- required)

Personal information you provide may be used for secondary purposes (Privacy Law, s.15.04(1)(m))

BLACK INK ONLY

\htagreement rev. 8/8/18

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(Original document will be recorded in the Register of Deeds office)

INSTRUCTIONS:

FORM MUST BE COMPLETED AND SIGNED IN BLACK INK. ALL INFORMATION MUST BE COMPLETE & LEGIBLE OR IT WILL NOT BE ACCEPTED AT THE REGISTER OF DEEDS.

1. The area in the **top right MUST be left blank for recording information.** ALL OTHER BOXES MUST BE COMPLETED.
2. The Sanitary Permit Number is assigned when the application is turned into the Zoning Office. The Zoning Office will fill in this box.
3. Fill in the Parcel Identification Number (PIN#). This number should be the Tax Parcel Number and can be found near the upper right hand corner of the owner's tax bill. (Example: 032-3505-131-9999)
4. This is the date the agreement is made between the owner and the Governmental Unit.
5. The Governmental Unit is the County in which the property is located.
6. Print or type the property owner(s)' name exactly as they appear on the deed. If both owners are listed on this document they must both sign (notarized) at the bottom of the page.
7. Fill in the land description. You can often find this information on your Tax Bill or your deed.
8. Print or type the owner(s)' name exactly as it appears on the deed. If both are listed on this document, both must sign before a notary.
9. The owner(s) must sign **IN THE PRESENCE OF A NOTARY PUBLIC.** **Please make sure that the Notary stamps or seals** the document over their signature.
10. The person that filled in items 2 through 7 must print or type their name as the person completing/drafting the form.
11. The Governmental Official information is provided. It will be signed and dated upon submission to the Land Services Office.

THE ORIGINAL MUST BE RETURNED BY EITHER YOU OR YOUR PLUMBER TO THE ZONING OFFICE WITH THE \$30 RECORDING FEE, Check payable to: Lincoln County. We can not process the sanitary application submitted by your plumber until we have the original document and recording fee.