

**Private On-Site Wastewater Treatment System (POWTS)
Index and Title Sheet**

Owner's Name: _____

Site address: _____

Location: Lot _____, Block _____, Subdivision/CSM _____ being part of the
_____ ¼ of the _____ ¼ or Gov. Lot # _____, Section _____, Town _____ N, Range _____ W
Town of _____, Pierce County, WI.
Parcel Identification # _____ - _____ - _____

Design: In accordance with Department of Safety & Professional Services (SPS) Wisconsin
Administrative Code ch. SPS 381 through 387 and 391. Design manual (choose one):

Holding Tank Component Manual [VER 2.0, SBD-10855-P (N. 03/07, R. 1/12)]

In-ground Soil Absorption Component Manual [SBD-10705-P (N.01/01, R.10/12)]

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Attachments: _____

Plumber/Designer: _____ Signed: _____

Credential Number: _____ Date: _____