

**Notice:** Pursuant to s. 283.84, Wis. Stats., and ch. NR 217 Wis. Adm. Code, this form must be completed by any WPDES permittee that is using water quality trading as a method of complying with a permit limitation. Failure to complete this form would not result in penalties. Personal information collected will be used for administrative purposes and may be provided to requesters to the extent required by Wisconsin's Open Records Law (ss. 19.31 - 19.39, Wis. Stats.).

**Applicant Information**

Permittee Name Village of Blue River		Permit Number WI- 0023418-09-0	Facility Site Number	
Facility Address 607 West Street		City Blue River	State WI	ZIP Code 53518
Project Contact Name (if applicable) Jordan Fure (Delta 3 Eng.)	Address 875 South Chestnut Street	City Platteville	State WI	ZIP Code 53818
Project Name Blue River WWTF Upgrade				
Receiving Water Name Blue River	Parameter(s) being traded Total Phosphorus	HUC 12(s) 070700051407		

Is the permittee in a point or nonpoint source dominated watershed?  Point source dominated  
 (See PRESTO results - <http://dnr.wi.gov/topic/surfacewater/presto.html>)  Nonpoint source dominated

**Credit Generator Information**

Credit generator type (select all that apply):

<input type="checkbox"/> Permitted Discharge (non-MS4/CAFO)	<input checked="" type="checkbox"/> Urban nonpoint source discharge
<input type="checkbox"/> Permitted MS4	<input checked="" type="checkbox"/> Agricultural nonpoint source discharge
<input type="checkbox"/> Permitted CAFO	<input type="checkbox"/> Other - Specify: _____

Are any of the credit generators in a different HUC 12 than the applicant?  Yes; HUC 12: \_\_\_\_\_  
 No

Unsure

Are any of the credit generators downstream of the applicant?  Yes  
 No

Unsure

Will a broker/exchange be used to facilitate trade?  Yes; Name: \_\_\_\_\_  
 No

Unsure

**Point to Point Trades (Traditional Municipal Discharge, MS4, CAFO)**

Discharge Type	Permit Number	Name	Contact Address	Is the point source credit generator currently in compliance with their permit requirements?
<input type="radio"/> Traditional <input type="radio"/> MS4 <input type="radio"/> CAFO				<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unsure
<input type="radio"/> Traditional <input type="radio"/> MS4 <input type="radio"/> CAFO				<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unsure
<input type="radio"/> Traditional <input type="radio"/> MS4 <input type="radio"/> CAFO				<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unsure
<input type="radio"/> Traditional <input type="radio"/> MS4 <input type="radio"/> CAFO				<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unsure
<input type="radio"/> Traditional <input type="radio"/> MS4 <input type="radio"/> CAFO				<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unsure

**Point to Nonpoint Trades (Non-permitted Agricultural, Non-Permitted Urban, etc.)**

List the practices that will be used to generate credits:

The Village intends to perform streambank stabilization. The construction will occur upstream of Outfall 001.

Method for quantifying credits generated:  Monitoring  
 Modeling, Names: NRCS Streambank Erosion Estimator  
 Other: \_\_\_\_\_

Projected date credits will be available:

**The preparer certifies all of the following:**

- I am familiar with the specifications submitted for this application, and I believe all applicable items in this checklist have been addressed.
- I have completed this document to the best of my knowledge and have not excluded pertinent information.

Signature of Preparer



Date Signed

10/11/2022

**Authorized Representative Signature**

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision. Based on my inquiry of those persons directly responsible for gathering and entering the information, the information is, to the best of my knowledge and belief, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature of Authorized Representative



Date Signed

11/8/22