Note: In order to fill and save this form electronically, it must be opened using Adobe Reader or Acrobat software. Save a copy of the file, open Adobe Reader, select File > Open and browse for the file you saved.

State of Wisconsin
Department of Natural Resources
Bureau of Drinking Water and Groundwater, DG/5
PO Box 7921, Madison WI 53707-7921
dnr.wi.gov

Chlorination Application

Form 3300-202 (R 10/23)

Notice: This form is authorized by ss. 280.11, 280.13, 281.11, and 281.41, Wis. Stats., and ch. NR 812, Wis. Adm. Code, for private or noncommunity water supply wells applying to use pellet chlorination treatment in compliance with sections NR 812.09(4)(c) and NR 812.37(3) (b), Wis. Adm. Code. Completion of this form or a similar form approved by the Department of Natural Resources is mandatory. Personal information collected will be used for administrative purposes and may be provided to requesters to the extent required by the Wisconsin's Public Records Law [ss. 19.31-19.39, Wis. Stats.]. Unless otherwise noted, all citations refer to Wis. Adm. Code.

Section A							
Contractor / Installer Information	on						
Name and Title				Company			
Street Address				City		State	ZIP Code
Stroot / tudiood							
Phone Number (include area code) Fax Number				Email Address			
Well Owner Information							
Name and Title				Company			
Street Address				City State ZIP Code			
Phone Number (include area code) Fax Number			Email Address				
Well Location and Chlorination				la	le acce	1	
County	Town N	Range	○E ○W	Section	Latitude (DD, ex. 44.4444)	Longitud	e (DD, ex89.9999)
Unique Well Number (if constructed after 1987)		_		e Make	Device Model	Anticipat	ion Installation Date
Section B							
The chlorinator is being installed for	or the following	g reasons (select al	I that apply):			
Hydrogen Sulfide Control	 Control of tag 	ste, odor a	nd the c	orrosion asso	ociated with hydrogen sulf	ide.	
Animal Water Treatment – providing more potable water systems that otherwise	er. Prevention	of the spre	ead of dis	sease among	livestock or poultry through	gh the live	stock or poultry
Sulfur Bacteria Control – Control of slime-producing organisms that reduce sulfates to hydrogen sulfide (sulfate reducing bacteria).							
Iron and/or Manganese Ox by the oxidation/filtration me	tidation – Pred thod.	cipitation of	f iron an	d/or mangan	ese as the first step in the	removal c	f those minerals
Iron Bacteria Control – Co precipitation of iron (ochre	ntrol and preve) associated	vention of with iron I	fouling bacteria	of pumps, wand other s	vells and water systems lime forming organisms	with the l	biological
Other – Describe other taste	e and odor pro	blems not	describe	d above:			
NOTE: Results from bacteriological bacteria is not present in the	al water tests t				be provided with this appli	cation, inc	licating that
	ne well.						
Section C							
Certification Authorized Representative Name				Title			
Addion200 Representative Haine							
I certify that the information contain	ned above is to	rue, accura	ate and o	complete to th	ne best of my knowledge a	and belief.	
Signature of Owner or Authorized Representative Date Signed (mm/dd/yyyy)							

Chlorination Application

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Pellet Chlorinator Installation Conditions and Decision

Approval Conditions

- Upon request by the department, the Chlorinator shall be turned off for at least four (4) consecutive days (96 hours) so an untreated water sample may be obtained and tested for coliform bacteria.
- The installation shall comply with the requirements of s. NR 812.30, Wis. Adm. Code, for vermin-proof, water-tight well cap or seal and drop tube assembly.
- The pellet chlorinator shall be installed by a licensed pump installer or by the well owner.
- The well shall be maintained in compliance with the construction and location requirements of ch. NR 812, Wis. Adm. Code.

Notice of Appeal Rights: If you believe that you have a right to challenge this decision, you should know that the Wisconsin Statutes and administrative rules establish time periods within which requests to review Department decisions must be filled. To request a contested case hearing pursuant to s. 227.42, Wis. Stats., you have 30 days after the decision is mailed, or otherwise served by the Department, to serve a petition for hearing on the Secretary of the Department of Natural Resources. Requests for contested case hearings must be made in accordance with ch. NR 2, Wis. Adm. Code. Filing a request for a contested case hearing does not extend the 30 day period for filing a petition for judicial review. For judicial review of a decision pursuant to ss. 227.52 and 227.53, Wis. Stats., you must file your petition with the appropriate circuit court and serve the petition on the Department within 30 days after the decision is mailed. A petition for judicial review must name the Department of Natural Resources as the respondent.

LEAVE BLANK DNR USE ONLY						
Received						
Action						
On						
Ву						