

DIRECTIONS FOR COMPLETING AFFIDAVIT OF ALTERNATE DESIGN FLOW CALCULATION

All owners must sign the document and all owners names must be typed below their signature. If necessary, add an additional full size page.

Do not reduce the size of the form by copying. Do not fax.

Document must be prepared with black ink or typed. Typed is preferred.

You must use a CURRENT FULL LEGAL DESCRIPTION:

Your tax bill does not reflect the full legal description. Your deed may or may not reflect the current legal description.

**This calculation sheet requires a \$25.00 fee payable to Adams County Planning & Zoning along with a County Permit Application.

** A \$30.00 fee is payable to Register of Deeds for the recording document.

**ALTERNATE DESIGN FLOW CALCULATIONS
FOR A POWTS SERVICING AN EXISTING ONE OR TWO FAMILY DWELLING**

Parcel ID # _____ County Permit # _____ Owners Name _____

EXISTING POWTS DESIGN PARAMETERS *(As originally permitted)*

Design Wastewater Flow _____ gpd, Septic Tank volume _____ gals. and Number of Bedrooms _____.
All Calculated Alternate Design Flow methods shall not exceed the existing POWTS design flow gallons per day as originally permitted.

METHOD -- A --- PER CAPITA OCCUPANCY *(Per person or number of users)*

Design Wastewater Flow for a POWTS serving a dwelling is 150 gallons per day per bedroom, based on 2 persons per bedroom unless otherwise approved by the department. Design Wastewater Flow per person = 75 gallons per day (150gpd divided by 2).

Existing POWTS Design Flow _____ gpd divided by 75 gpd (per person) = [_____] **the total number of persons allowed per capita occupancy to be serviced by the existing POWTS Design.**

METHOD -- B --- USAGE OF DWELLING *(Requires Water Meter Installed by Plumber with affidavit of installation)*

Actual meter readings may be used to calculate the combined estimated design wastewater flow from a dwelling. To calculate the estimated design wastewater flow, use the following formula and compare the answer to the peak metered flow. The frequency of meter readings should be daily for 30 consecutive days of occupied dwelling use. **Must choose the larger of the two estimated design flows.**

1 - Total Gallons of Metered Flow _____ divided by _____ the Number of Readings = _____ the average gallons per day of estimated wastewater flow, multiplied by 1.5 = [_____] gallons per day of Design Wastewater Flow.

2 - Peak Meter Flow Reading _____ multiplied by 1.5 = [_____] gallon per day of Design Wastewater Flow.

Meter Readings Start Date _____ Ending Date _____ Starting Meter Reading _____

Meter Reading & Date	Gallons Used	Meter Reading & Date	Gallons Used	Meter Reading & Date	Gallons Used

Meter Manufacturer: _____ Model # _____ **Total Gallons Used** _____

METHOD -- C --- PER FUNCTION FLOW

The per function flow ratings, shall be substantiated by manufacturers data of the, per function flow and detailed use data from the facility in question or a similar facility under similar condition of use. Documentation must be provided listing the manufacturer's data of per function flow, and detailed use as gallons per day for each device used within the dwelling serviced by the existing POWTS.

Total Per Function Flow _____ gpd multiplied by 1.5 = [_____] gallons per day of Design Wastewater Flow

RESIDENTIAL SEPTIC TANK VOLUME MINIMUM SIZING *(Based On 3 Year Maintenance Cycle)*

Existing POWTS Design Wastewater Flow _____ gpd multiplied 2.088 = _____ **Minimum Septic Tank Volume**

Minimum Septic Tank volume can not exceed the existing POWTS septic tank volume when based on 3 year Maintenance Cycle.

For Dept. Use Only

Date Reviewed & Accepted / /	Inspector's Signature	Cert. No.
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AFFIDAVIT OF ALTERNATE DESIGN FLOW CALCULATION

This affidavit shall be binding upon the owner(s), their heirs and assignees and shall run with the land. The terms of this affidavit will remain in effect until the Adams County Planning & Zoning Dept. as being responsible for the regulation of Private Onsite Wastewater Treatment Systems certifies the design flow calculation has been changed or the existing POWTS has been removed from the property.

Property Owner(s) Name (Black Ink only)		
Parcel Identifier Number (PIN#)		
Unit Number(s) {For Condominium}		
I/We the undersigned am/are the owner(s) of property located in Adams County Wisconsin, described as follows: Provide full legal land description. Attach full size page(s) if additional space is needed.		
Govt. Lot #	or	1/4, 1/4, Section
		Town Range E
Lot #	Block #	Subdivision Name or CSM #
<input type="checkbox"/> City <input type="checkbox"/> Village <input type="checkbox"/> Town Name.		
Street Address:		

Return to: Adams County Planning & Zoning Department
 P. O. Box 187
 Friendship, WI 53934

I/We the property owner(s) understand and agree to the following:

I/We declare that the design of the Private Onsite Wastewater Treatment System serving the dwelling on the above described property is not based upon the number of bedrooms within the dwelling.

I/We further declare that the design wastewater flow calculation used for the dwelling on the above described property is based upon a per capita occupancy method (per person or number of user) or on a usage of dwelling method (metered water flow) or on a per function flow method (gallons per day per function of each device used).

I/We understand and agree the use of an alternate design flow calculation may limit the occupancy or use of the dwelling pursuant to the Private Onsite Wastewater Treatment System design serving the dwelling or structure and of method used.

Owner(s) Name (print): _____

Owner(s) Signature: _____

Date: _____

NOTARY PUBLIC

Subscribed and Sworn before me this _____ day of _____, _____

 NOTARY PUBLIC (Signature)

My commission expires: _____

Document Drafted By (print): _____

Dept. Use Only:

Reviewed by & date accepted as part of a sanitary permit: _____ (ACPZDF – 113A (R01/10))