

## **Regular Meeting of the Bear Creek Public Utilities May 11, 2026**

Village President Dan Miller called the Public Utilities meeting to order at 7:00pm.

Commissioner's present were Dominic Shaw, Alissa Thebo, Chuck Jablonski, and Judy Jahnke. Absent and excused was Mike Young.

A motion was made by Alissa and seconded by Chuck to approve the agenda as presented. All in favor, motion carried.

Minutes from the 4/13/2026 meeting were reviewed. A motion was made by Chuck and seconded by Alissa to approve the minutes. All in favor, motion carried.

After review, Alissa motioned, and Dominic seconded to approve the monthly voucher report. All in favor, motion carried.

The financial reports for Water and Sewer were reviewed by the commissioners.

The water and sewer department updates were presented by Dan Miller in MCO's late arrival.

Ethan Lang with McMahon & Associates was present to go over our options that were provided in the facilities plan for the WWTP so far. The options provided would cost the Village millions to construct and then a huge dollar amount to maintain every year. McMahons is going to finish up the facilities plan and present at the July board meeting.

A motion was made by Chuck and seconded by Judy to table the decision on the facilities plan until the July meeting. All in favor, motion carried.

No public input

Future Agenda Items- Facilities Plan decision

Next Village Utility meeting is Monday June 8, 2026 at 7:00pm.

Motion made by Chuck and seconded by Judy to adjourn. All in favor, motion carried

Respectfully submitted,  
Ashley Janke- Clerk/Treasurer





## March 2026 Operators Report

### Waterworks

- 5/18--Dirty water complaint, flushed hydrants on Clark St and Durrel St.
- 5/19--Hydrant flushing started
- 5/21--Flushing Continued
- Collected VOC and Nitrate samples
- Monthly water report was submitted to the DNR.
- Distribution bacteriological samples were safe.
- Water meters were read with no issues.
- Digger hotline locates are up to date.

### Wastewater

- 5/13--Rare Earth for phos treatment was refilled. Switched from Martelle to Hawkins because of cost. Saved at least \$4 per pound.
- 5/19-- Ben cleaned both check valves in the plant lift station.
- Monthly DMR report was submitted to the DNR.
- Preventative maintenance performed on equipment.

# Compliance Maintenance Annual Report

Bear Creek Wastewater Treatment Facility

Last Updated: Reporting For:  
6/5/2026 **2025**

## Influent Flow and Loading

### 1. Monthly Average Flows and BOD Loadings

1.1 Verify the following monthly flows and BOD loadings to your facility.

Influent No. 701	Influent Monthly Average Flow, MGD	x	Influent Monthly Average BOD Concentration mg/L	x	8.34	=	Influent Monthly Average BOD Loading, lbs/day
January	0.0185	x	305	x	8.34	=	47
February	0.0176	x	275	x	8.34	=	40
March	0.0206	x	265	x	8.34	=	45
April	0.0224	x	254	x	8.34	=	47
May	0.0207	x	246	x	8.34	=	43
June	0.0209	x	277	x	8.34	=	48
July	0.0238	x	213	x	8.34	=	42
August	0.0210	x	245	x	8.34	=	43
September	0.0203	x	274	x	8.34	=	46
October	0.0193	x	310	x	8.34	=	50
November	0.0232	x	296	x	8.34	=	57
December	0.0235	x	262	x	8.34	=	51

### 2. Maximum Monthly Design Flow and Design BOD Loading

2.1 Verify the design flow and loading for your facility.

Design	Design Factor	x	%	=	% of Design
Max Month Design Flow, MGD	.1	x	90	=	0.09
		x	100	=	.1
Design BOD, lbs/day	170	x	90	=	153
		x	100	=	170

2.2 Verify the number of times the flow and BOD exceeded 90% or 100% of design, points earned, and score:

	Months of Influent	Number of times flow was greater than 90% of	Number of times flow was greater than 100% of	Number of times BOD was greater than 90% of design	Number of times BOD was greater than 100% of design
January	1	0	0	0	0
February	1	0	0	0	0
March	1	0	0	0	0
April	1	0	0	0	0
May	1	0	0	0	0
June	1	0	0	0	0
July	1	0	0	0	0
August	1	0	0	0	0
September	1	0	0	0	0
October	1	0	0	0	0
November	1	0	0	0	0
December	1	0	0	0	0
Points per each		2	1	3	2
Exceedances		0	0	0	0
Points		0	0	0	0
<b>Total Number of Points</b>					<b>0</b>

0

# Compliance Maintenance Annual Report

Bear Creek Wastewater Treatment Facility

Last Updated: Reporting For:

6/5/2026

2025

## 3. Flow Meter

3.1 Was the influent flow meter calibrated in the last year?

Yes Enter last calibration date (MM/DD/YYYY)

2025-11-03

No

If No, please explain:

## 4. Sewer Use Ordinance

4.1 Did your community have a sewer use ordinance that limited or prohibited the discharge of excessive conventional pollutants ((C)BOD, SS, or pH) or toxic substances to the sewer from industries, commercial users, hauled waste, or residences?

Yes

No

If No, please explain:

4.2 Was it necessary to enforce the ordinance?

Yes

No

If Yes, please explain:

## 5. Septage Receiving

5.1 Did you have requests to receive septage at your facility?

Septic Tanks

Holding Tanks

Grease Traps

Yes

Yes

Yes

No

No

No

5.2 Did you receive septage at your facility? If yes, indicate volume in gallons.

Septic Tanks

Yes  gallons

No

Holding Tanks

Yes  gallons

No

Grease Traps

Yes  gallons

No

5.2.1 If yes to any of the above, please explain if plant performance is affected when receiving any of these wastes.

## 6. Pretreatment

6.1 Did your facility experience operational problems, permit violations, biosolids quality concerns, or hazardous situations in the sewer system or treatment plant that were attributable to commercial or industrial discharges in the last year?

Yes

No

If yes, describe the situation and your community's response.

6.2 Did your facility accept hauled industrial wastes, landfill leachate, etc.?

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Bear Creek Wastewater Treatment Facility

Last Updated: Reporting For:  
6/5/2026 **2025**

Yes

No

If yes, describe the types of wastes received and any procedures or other restrictions that were in place to protect the facility from the discharge of hauled industrial wastes.

<b>Total Points Generated</b>	0
<b>Score (100 - Total Points Generated)</b>	100
<b>Section Grade</b>	<b>A</b>

# Compliance Maintenance Annual Report

Bear Creek Wastewater Treatment Facility

Last Updated: Reporting For:  
6/5/2026 **2025**

## Effluent Quality and Plant Performance (BOD/CBOD)

### 1. Effluent (C)BOD Results

1.1 Verify the following monthly average effluent values, exceedances, and points for BOD or CBOD

Outfall No. 001	Monthly Average Limit (mg/L)	90% of Permit Limit > 10 (mg/L)	Effluent Monthly Average (mg/L)	Months of Discharge with a Limit	Permit Limit Exceedance	90% Permit Limit Exceedance
January	15	13.5	2	1	0	0
February	15	13.5	4	1	0	0
March	15	13.5	14	1	0	1
April	15	13.5	5	1	0	0
May	15	13.5	4	1	0	0
June	15	13.5	2	1	0	0
July	15	13.5	1	1	0	0
August	15	13.5	2	1	0	0
September	15	13.5	1	1	0	0
October	15	13.5	3	1	0	0
November	15	13.5	2	1	0	0
December	15	13.5	2	1	0	0

\* Equals limit if limit is <= 10

Months of discharge/yr	12		
Points per each exceedance with 12 months of discharge		7	3
Exceedances		0	1
Points		0	3
<b>Total number of points</b>			<b>3</b>

NOTE: For systems that discharge intermittently to state waters, the points per monthly exceedance for this section shall be based upon a multiplication factor of 12 months divided by the number of months of discharge. Example: For a wastewater facility discharging only 6 months of the year, the multiplication factor is  $12/6 = 2.0$

1.2 If any violations occurred, what action was taken to regain compliance?

The limit exceedance was caused by a blower failure that occurred over the weekend. Once it was discovered on Monday, the operator switched blowers and a new blower was ordered.

### 2. Flow Meter Calibration

2.1 Was the effluent flow meter calibrated in the last year?

Yes Enter last calibration date (MM/DD/YYYY)

2025-11-03

No

If No, please explain:

### 3. Treatment Problems

3.1 What problems, if any, were experienced over the last year that threatened treatment?

We had some issues with our Rare Earth pump, pumping either too much or going air bound.

### 4. Other Monitoring and Limits

4.1 At any time in the past year was there an exceedance of a permit limit for any other pollutants such as chlorides, pH, residual chlorine, fecal coliform, or metals?

Yes

3

# Compliance Maintenance Annual Report

Bear Creek Wastewater Treatment Facility

Last Updated: Reporting For:  
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- No

If Yes, please explain:

4.2 At any time in the past year was there a failure of an effluent acute or chronic whole effluent toxicity (WET) test?

- Yes

- No

If Yes, please explain:

4.3 If the biomonitoring (WET) test did not pass, were steps taken to identify and/or reduce source(s) of toxicity?

- Yes

- No

- N/A

Please explain unless not applicable:

<b>Total Points Generated</b>	<b>3</b>
<b>Score (100 - Total Points Generated)</b>	<b>97</b>
<b>Section Grade</b>	<b>A</b>

# Compliance Maintenance Annual Report

Bear Creek Wastewater Treatment Facility

Last Updated: Reporting For:  
6/5/2026 **2025**

## Effluent Quality and Plant Performance (Total Suspended Solids)

### 1. Effluent Total Suspended Solids Results

1.1 Verify the following monthly average effluent values, exceedances, and points for TSS:

Outfall No. 001	Monthly Average Limit (mg/L)	90% of Permit Limit >10 (mg/L)	Effluent Monthly Average (mg/L)	Months of Discharge with a Limit	Permit Limit Exceedance	90% Permit Limit Exceedance
January	20	18	1	1	0	0
February	20	18	2	1	0	0
March	20	18	8	1	0	0
April	20	18	5	1	0	0
May	20	18	3	1	0	0
June	20	18	4	1	0	0
July	20	18	2	1	0	0
August	20	18	4	1	0	0
September	20	18	2	1	0	0
October	20	18	5	1	0	0
November	20	18	4	1	0	0
December	20	18	5	1	0	0

\* Equals limit if limit is <= 10

Months of Discharge/yr	12		
<b>Points per each exceedance with 12 months of discharge:</b>		<b>7</b>	<b>3</b>
Exceedances		0	0
Points		0	0
<b>Total Number of Points</b>			<b>0</b>

NOTE: For systems that discharge intermittently to state waters, the points per monthly exceedance for this section shall be based upon a multiplication factor of 12 months divided by the number of months of discharge.

Example: For a wastewater facility discharging only 6 months of the year, the multiplication factor is  $12/6 = 2.0$

1.2 If any violations occurred, what action was taken to regain compliance?

<b>Total Points Generated</b>	<b>0</b>
<b>Score (100 - Total Points Generated)</b>	<b>100</b>
<b>Section Grade</b>	<b>A</b>

# Compliance Maintenance Annual Report

Bear Creek Wastewater Treatment Facility

Last Updated: Reporting For:  
6/5/2026 **2025**

## Effluent Quality and Plant Performance (Ammonia - NH3)

### 1. Effluent Ammonia Results

1.1 Verify the following monthly and weekly average effluent values, exceedances and points for ammonia

Outfall No. 001	Monthly Average NH3 Limit (mg/L)	Weekly Average NH3 Limit (mg/L)	Effluent Monthly Average NH3 (mg/L)	Monthly Permit Limit Exceedance	Effluent Weekly Average for Week 1	Effluent Weekly Average for Week 2	Effluent Weekly Average for Week 3	Effluent Weekly Average for Week 4	Weekly Permit Limit Exceedance
January	12	13	13.322	1	27.1	12.52	7.255	6.815	1
February	12	13	.185	0	.234	.164	.152	.191	0
March	12	13	.323	0	.424	.534	.175	.159	0
April	2.2	5.6	.098	0	.125	.104	.078	.086	0
May	2.2	5.6	.057	0	.093	.067	.024	.047	0
June	2.2	5.6	.112	0	.085	.256	.055	.053	0
July	2.2	5.6	.033	0	.021	.023	.043	.046	0
August	2.2	5.6	.023	0	0	.024	.022	.047	0
September	2.2	5.6	.052	0	.048	.058	.06	.044	0
October	12	13	.076	0	.075	.105	.061	.063	0
November	12	13	.06	0	.061	.054	.071	.054	0
December	12	13	.057	0	.045	.049	.058	.074	0
Points per each exceedance of Monthly average:									10
Exceedances, Monthly:									1
Points:									10
Points per each exceedance of weekly average (when there is no monthly average):									2.5
Exceedances, Weekly:									1
Points:									0
<b>Total Number of Points</b>									<b>10</b>

10

NOTE: Limit exceedances are considered for monthly OR weekly averages but not both. When a monthly average limit exists it will be used to determine exceedances and generate points. This will be true even if a weekly limit also exists. When a weekly average limit exists and a monthly limit does not exist, the weekly limit will be used to determine exceedances and generate points.

1.2 If any violations occurred, what action was taken to regain compliance?

The rare earth pump was pumping too much into our system. We lowered the pump speed and stroke.

<b>Total Points Generated</b>	10
<b>Score (100 - Total Points Generated)</b>	90
<b>Section Grade</b>	<b>B</b>

# Compliance Maintenance Annual Report

Bear Creek Wastewater Treatment Facility

Last Updated: Reporting For:  
6/5/2026 **2025**

## Effluent Quality and Plant Performance (Phosphorus)

### 1. Effluent Phosphorus Results

#### 1.1 Verify the following monthly average effluent values, exceedances, and points for Phosphorus

Outfall No. 001	Monthly Average phosphorus Limit (mg/L)	Effluent Monthly Average phosphorus (mg/L)	Months of Discharge with a Limit	Permit Limit Exceedance
January	5.74	0.314	1	0
February	5.74	3.097	1	0
March	5.74	5.838	1	1
April	5.74	2.134	1	0
May	5.74	1.171	1	0
June	5.74	2.294	1	0
July				
August				
September				
October				
November				
December				
Months of Discharge/yr			6	
<b>Points per each exceedance with 6 months of discharge:</b>				<b>20</b>
Exceedances				1
<b>Total Number of Points</b>				<b>20</b>

20

NOTE: For systems that discharge intermittently to waters of the state, the points per monthly exceedance for this section shall be based upon a multiplication factor of 12 months divided by the number of months of discharge.

Example: For a wastewater facility discharging only 6 months of the year, the multiplication factor is  $12/6 = 2.0$

#### 1.2 If any violations occurred, what action was taken to regain compliance?

The rare earth pump was air bound due to lowering the stroke and speed too much. Readjusted pump to keep it from getting air bound.

<b>Total Points Generated</b>	20
<b>Score (100 - Total Points Generated)</b>	80
<b>Section Grade</b>	<b>C</b>

# Compliance Maintenance Annual Report

Bear Creek Wastewater Treatment Facility

Last Updated: Reporting For:  
6/5/2026 2025

## Biosolids Quality and Management

### 1. Biosolids Use/Disposal

1.1 How did you use or dispose of your biosolids? (Check all that apply)

- Land applied under your permit
- Publicly Distributed Exceptional Quality Biosolids
- Hauled to another permitted facility
- Landfilled
- Incinerated
- Other

NOTE: If you did not remove biosolids from your system, please describe your system type such as lagoons, reed beds, recirculating sand filters, etc.

1.1.1 If you checked Other, please describe:

### 3. Biosolids Metals

Number of biosolids outfalls in your WPDES permit:

3.1 For each outfall tested, verify the biosolids metal quality values for your facility during the last calendar year.

#### Outfall No. 003 - LIQUID SLUDGE (INACTIVE)

Parameter	80% of Limit	H.Q. Limit	Ceiling Limit	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	80% Value	High Quality	Ceiling
Arsenic		41	75														0	0
Cadmium		39	85														0	0
Copper		1500	4300														0	0
Lead		300	840														0	0
Mercury		17	57														0	0
Molybdenum	60		75													0		0
Nickel	336		420													0		0
Selenium	80		100													0		0
Zinc		2800	7500														0	0

#### Outfall No. 002 - REED BED CAKE SLUDGE

Parameter	80% of Limit	H.Q. Limit	Ceiling Limit	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	80% Value	High Quality	Ceiling
Arsenic		41	75											8.86			0	0
Cadmium		39	85											<7.55			0	0
Copper		1500	4300											304			0	0
Lead		300	840											<103			0	0
Mercury		17	57											.598			0	0
Molybdenum	60		75											<82	0			0
Nickel	336		420											38	0			0
Selenium	80		100											<19	0			0
Zinc		2800	7500											641			0	0

3.1.1 Number of times any of the metals exceeded the high quality limits OR 80% of the limit for molybdenum, nickel, or selenium = 0

Exceedence Points

- 0 (0 Points)
- 1-2 (10 Points)
- > 2 (15 Points)

3.1.2 If you exceeded the high quality limits, did you cumulatively track the metals loading at each land application site? (check applicable box)

- Yes

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<ul style="list-style-type: none"> <li>○ No (10 points)</li> <li>● N/A - Did not exceed limits or no HQ limit applies (0 points)</li> <li>○ N/A - Did not land apply biosolids until limit was met (0 points)</li> </ul> <p>3.1.3 Number of times any of the metals exceeded the ceiling limits = 0 Exceedence Points</p> <ul style="list-style-type: none"> <li>● 0 (0 Points)</li> <li>○ 1 (10 Points)</li> <li>○ &gt; 1 (15 Points)</li> </ul> <p>3.1.4 Were biosolids land applied which exceeded the ceiling limit?</p> <ul style="list-style-type: none"> <li>○ Yes (20 Points)</li> <li>● No (0 Points)</li> </ul> <p>3.1.5 If any metal limit (high quality or ceiling) was exceeded at any time, what action was taken? Has the source of the metals been identified?</p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	0
<p>6. Biosolids Storage</p> <p>6.1 How many days of actual, current biosolids storage capacity did your wastewater treatment facility have either on-site or off-site?</p> <ul style="list-style-type: none"> <li>● &gt;= 180 days (0 Points)</li> <li>○ 150 - 179 days (10 Points)</li> <li>○ 120 - 149 days (20 Points)</li> <li>○ 90 - 119 days (30 Points)</li> <li>○ &lt; 90 days (40 Points)</li> <li>○ N/A (0 Points)</li> </ul> <p>6.2 If you checked N/A above, explain why.</p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	0
<p>7. Issues</p> <p>7.1 Describe any outstanding biosolids issues with treatment, use or overall management:</p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>	

<b>Total Points Generated</b>	0
<b>Score (100 - Total Points Generated)</b>	100
<b>Section Grade</b>	<b>A</b>

# Compliance Maintenance Annual Report

Bear Creek Wastewater Treatment Facility

Last Updated: Reporting For:

6/5/2026

2025

## Staffing and Preventative Maintenance (All Treatment Plants)

### 1. Plant Staffing

1.1 Was your wastewater treatment plant adequately staffed last year?

Yes

No

If No, please explain:

Could use more help/staff for:

1.2 Did your wastewater staff have adequate time to properly operate and maintain the plant and fulfill all wastewater management tasks including recordkeeping?

Yes

No

If No, please explain:

### 2. Preventative Maintenance

2.1 Did your plant have a documented AND implemented plan for preventative maintenance on major equipment items?

Yes (Continue with question 2)

No (40 points)

If No, please explain, then go to question 3:

2.2 Did this preventative maintenance program depict frequency of intervals, types of lubrication, and other tasks necessary for each piece of equipment?

Yes

No (10 points)

2.3 Were these preventative maintenance tasks, as well as major equipment repairs, recorded and filed so future maintenance problems can be assessed properly?

Yes

Paper file system

Computer system

Both paper and computer system

No (10 points)

0

### 3. O&M Manual

3.1 Does your plant have a detailed O&M and Manufacturer Equipment Manuals that can be used as a reference when needed?

Yes

No

### 4. Overall Maintenance /Repairs

4.1 Rate the overall maintenance of your wastewater plant.

Excellent

Very good

Good

Fair

Poor

Describe your rating:

# Compliance Maintenance Annual Report

**Bear Creek Wastewater Treatment Facility**

Last Updated: Reporting For:  
6/5/2026 **2025**

The overall maintenance of the wastewater plant is very good, but there are some areas that could use improvement.
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<b>Total Points Generated</b>	0
<b>Score (100 - Total Points Generated)</b>	100
<b>Section Grade</b>	<b>A</b>

# Compliance Maintenance Annual Report

Bear Creek Wastewater Treatment Facility

Last Updated: Reporting For:  
6/5/2026 **2025**

## Operator Certification and Education

### 1. Operator-In-Charge

1.1 Did you have a designated operator-in-charge during the report year?

- Yes (0 points)
- No (20 points)

Name:

BRANDON J KAUFMAN

Certification No:

32779

0

### 2. Certification Requirements

2.1 In accordance with Chapter NR 114.56 and 114.57, Wisconsin Administrative Code, what level and subclass(es) were required for the operator-in-charge (OIC) to operate the wastewater treatment plant and what level and subclass(es) were held by the operator-in-charge?

Sub Class	SubClass Description	WWTP	OIC		
		Basic	OIT	Basic	Advanced
A1	Suspended Growth Processes	X			X
A2	Attached Growth Processes		X		
A3	Recirculating Media Filters		X		
A4	Ponds, Lagoons and Natural		X		
A5	Anaerobic Treatment Of Liquid		X		
B	Solids Separation	X			X
C	Biological Solids/Sludges	X			X
P	Total Phosphorus				X
N	Total Nitrogen		X		
D	Disinfection				X
L	Laboratory				X
U	Unique Treatment Systems				
SS	Sanitary Sewage Collection	X	NA	NA	X

0

2.2 Was the operator-in-charge certified at the appropriate level and subclass(es) to operate this plant? (Note: Certification in subclass SS is required 5 years after permit reissuance.)

- Yes (0 points)
- No (20 points)

2.3 For wastewater treatment facilities with a registered or certified laboratory, is at least one operator that works in the laboratory certified at the basic level in the laboratory (L) subclass?

- Yes
- No
- N/A – Wastewater treatment facility does not have a registered or certified laboratory

2.4 For wastewater treatment facilities that own and operate a sanitary sewage collection system, has at least one operator been designated the OIC for sanitary sewage collection system and certified at the basic level in the sanitary sewage collection system (SS) subclass?

- Yes
- No
- N/A – Owner of the Wastewater treatment facility does not own and operate a sanitary sewage collection system

### 3. Succession Planning

3.1 In the event of the loss of your designated operator-in-charge, did you have a contingency plan to ensure the continued proper operation and maintenance of the plant that includes one or more of the following options (check all that apply)?

- One or more additional certified operators on staff

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<input type="checkbox"/> An arrangement with another certified operator <input type="checkbox"/> An arrangement with another community with a certified operator <input type="checkbox"/> An operator on staff who has an operator-in-training certificate for your plant and is expected to be certified within one year <input checked="" type="checkbox"/> A consultant to serve as your certified operator <input type="checkbox"/> None of the above (20 points) If "None of the above" is selected, please explain: <div style="border: 1px solid black; height: 20px; width: 100%; margin-top: 5px;"></div>	0
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<p>4. Continuing Education Credits</p> <p>4.1 If you had a designated operator-in-charge, was the operator-in-charge earning Continuing Education Credits at the following rates?</p> <p>OIT and Basic Certification:</p> <ul style="list-style-type: none"> <li><input checked="" type="radio"/> Averaging 6 or more CECs per year.</li> <li><input type="radio"/> Averaging less than 6 CECs per year.</li> </ul> <p>Advanced Certification:</p> <ul style="list-style-type: none"> <li><input type="radio"/> Averaging 8 or more CECs per year.</li> <li><input type="radio"/> Averaging less than 8 CECs per year.</li> </ul>	
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<b>Total Points Generated</b>	0
<b>Score (100 - Total Points Generated)</b>	100
<b>Section Grade</b>	<b>A</b>

# Compliance Maintenance Annual Report

Bear Creek Wastewater Treatment Facility

Last Updated: Reporting For:  
6/5/2026 2025

## Financial Management

### 1. Provider of Financial Information

Name:

Ashley Janke

Telephone:

715-752-4356

(XXX) XXX-XXXX

E-Mail Address  
(optional):

clerk@villageofbearcreek.wi.gov

### 2. Treatment Works Operating Revenues

2.1 Are User Charges or other revenues sufficient to cover O&M expenses for your wastewater treatment plant AND/OR collection system ?

- Yes (0 points)
- No (40 points)

If No, please explain:

2.2 When was the User Charge System or other revenue source(s) last reviewed and/or revised?  
Year:

2025

- 0-2 years ago (0 points)
- 3 or more years ago (20 points)
- N/A (private facility)

2.3 Did you have a special account (e.g., CWF required segregated Replacement Fund, etc.) or financial resources available for repairing or replacing equipment for your wastewater treatment plant and/or collection system?

- Yes (0 points)
- No (40 points)

REPLACEMENT FUNDS [PUBLIC MUNICIPAL FACILITIES SHALL COMPLETE QUESTION 3]

### 3. Equipment Replacement Funds

3.1 When was the Equipment Replacement Fund last reviewed and/or revised?

Year:

2025

- 1-2 years ago (0 points)
- 3 or more years ago (20 points)
- N/A

If N/A, please explain:

### 3.2 Equipment Replacement Fund Activity

#### 3.2.1 Ending Balance Reported on Last Year's CMAR

\$ 154,596.85

3.2.2 Adjustments - if necessary (e.g. earned interest, audit correction, withdrawal of excess funds, increase making up previous shortfall, etc.)

+ \$ 12,129.75

3.2.3 Adjusted January 1st Beginning Balance

\$ 166,726.60

3.2.4 Additions to Fund (e.g. portion of User Fee, earned interest, etc.)

+ \$ 0.00

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3.2.5 Subtractions from Fund (e.g., equipment replacement, major repairs - use description box 3.2.6.1 below\*)

- \$ 39,282.77

3.2.6 Ending Balance as of December 31st for CMAR Reporting Year

\$ 127,443.83

All Sources: This ending balance should include all Equipment Replacement Funds whether held in a bank account(s), certificate(s) of deposit, etc.

3.2.6.1 Indicate adjustments, equipment purchases, and/or major repairs from 3.2.5 above.

Blower replacement, input seal, valves.

3.3 What amount should be in your Replacement Fund? \$ 127,443.83

0

Please note: If you had a CWFPP loan, this amount was originally based on the Financial Assistance Agreement (FAA) and should be regularly updated as needed. Further calculation instructions and an example can be found by clicking the SectionInstructions link under Info header in the left-side menu.

3.3.1 Is the December 31 Ending Balance in your Replacement Fund above, (#3.2.6) equal to, or greater than the amount that should be in it (#3.3)?

- Yes
- No

If No, please explain.

## 4. Future Planning

4.1 During the next ten years, will you be involved in formal planning for upgrading, rehabilitating, or new construction of your treatment facility or collection system?

- Yes - If Yes, please provide major project information, if not already listed below.
- No

Project #	Project Description	Estimated Cost	Approximate Construction Year
1	The Village has received a water quality based effluent limit for total phosphorus in their latest discharge permit. The Village is working with a consulting firm to determine the best course of action required to meet this limit	\$150,000	2024
2	Facilities plan	\$60,000	2026

## 5. Financial Management General Comments

### ENERGY EFFICIENCY AND USE

## 6. Collection System

### 6.1 Energy Usage

6.1.1 Enter the monthly energy usage from the different energy sources:

#### **COLLECTION SYSTEM PUMPAGE: Total Power Consumed**

Number of Municipally Owned Pump/Lift Stations:

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	Electricity Consumed (kWh)	Natural Gas Consumed (therms)
January	10,880	
February	10,160	
March	9,320	
April	9,320	
May	6,840	
June	6,600	
July	5,800	
August	5,360	
September	6,120	
October	5,760	
November	6,720	
December	9,600	
<b>Total</b>	<b>92,480</b>	<b>0</b>
<b>Average</b>	<b>7,707</b>	<b>0</b>

6.1.2 Comments:

## 6.2 Energy Related Processes and Equipment

6.2.1 Indicate equipment and practices utilized at your pump/lift stations (Check all that apply):

- Comminution or Screening
- Extended Shaft Pumps
- Flow Metering and Recording
- Pneumatic Pumping
- SCADA System
- Self-Priming Pumps
- Submersible Pumps
- Variable Speed Drives
- Other:

6.2.2 Comments:

6.3 Has an Energy Study been performed for your pump/lift stations?

- No
- Yes

Year:

By Whom:

Describe and Comment:

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## 6.4 Future Energy Related Equipment

6.4.1 What energy efficient equipment or practices do you have planned for the future for your pump/lift stations?

## 7. Treatment Facility

### 7.1 Energy Usage

7.1.1 Enter the monthly energy usage from the different energy sources:

#### TREATMENT PLANT: Total Power Consumed/Month

	Electricity Consumed (kWh)	Total Influent Flow (MG)	Electricity Consumed/Flow (kWh/MG)	Total Influent BOD (1000 lbs)	Electricity Consumed/Total Influent BOD (kWh/1000lbs)	Natural Gas Consumed (therms)
January	10,880	0.57	19,088	1.46	7,452	
February	10,160	0.49	20,735	1.12	9,071	
March	9,320	0.64	14,563	1.40	6,657	
April	9,320	0.67	13,910	1.41	6,610	
May	6,840	0.64	10,688	1.33	5,143	
June	6,600	0.63	10,476	1.44	4,583	
July	5,800	0.74	7,838	1.30	4,462	
August	5,360	0.65	8,246	1.33	4,030	
September	6,120	0.61	10,033	1.38	4,435	
October	5,760	0.60	9,600	1.55	3,716	
November	6,720	0.70	9,600	1.71	3,930	
December	9,600	0.73	13,151	1.58	6,076	
<b>Total</b>	<b>92,480</b>	<b>7.67</b>		<b>17.01</b>		<b>0</b>
<b>Average</b>	<b>7,707</b>	<b>0.64</b>	<b>12,327</b>	<b>1.42</b>	<b>5,514</b>	<b>0</b>

7.1.2 Comments:

### 7.2 Energy Related Processes and Equipment

7.2.1 Indicate equipment and practices utilized at your treatment facility (Check all that apply):

- Aerobic Digestion
- Anaerobic Digestion
- Biological Phosphorus Removal
- Coarse Bubble Diffusers
- Dissolved O2 Monitoring and Aeration Control
- Effluent Pumping
- Fine Bubble Diffusers
- Influent Pumping
- Mechanical Sludge Processing
- Nitrification
- SCADA System
- UV Disinfection
- Variable Speed Drives
- Other:

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## 7.2.2 Comments:

## 7.3 Future Energy Related Equipment

7.3.1 What energy efficient equipment or practices do you have planned for the future for your treatment facility?

## 8. Biogas Generation

8.1 Do you generate/produce biogas at your facility?

No

Yes

If Yes, how is the biogas used (Check all that apply):

Flared Off

Building Heat

Process Heat

Generate Electricity

Other:

## 9. Energy Efficiency Study

9.1 Has an Energy Study been performed for your treatment facility?

No

Yes

Entire facility

Year:

By Whom:

Describe and Comment:

Part of the facility

Year:

By Whom:

Describe and Comment:

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<b>Total Points Generated</b>	<b>0</b>
<b>Score (100 - Total Points Generated)</b>	<b>100</b>
<b>Section Grade</b>	<b>A</b>

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## Sanitary Sewer Collection Systems

### 1. Capacity, Management, Operation, and Maintenance (CMOM) Program

1.1 Do you have a CMOM program that is being implemented?

- Yes
- No

If No, explain:

1.2 Do you have a CMOM program that contains all the applicable components and items according to Wisc. Adm Code NR 210.23 (4)?

- Yes
- No (30 points)
- N/A

If No or N/A, explain:

1.3 Does your CMOM program contain the following components and items? (check the components and items that apply)

Goals [NR 210.23 (4)(a)]

Describe the major goals you had for your collection system last year:

The Village of Bear Creek will ensure that the collection system is properly managed, operated, and maintained at all times. The Village will take steps to ensure the sewage collection system provides adequate capacity to convey all peak design flows as well as eliminate excessive infiltration and inflow as defined in NR 110.03 (14). A process is in place to notify the public and other directly affected parties of any incidents of overflows from the sewerage treatment facility. Create and distribute informational materials to educate consumers on SSO's and need to replace sewer main and private laterals. The Village will televise 10 percent of the sewer mains each year. The Village will also inspect 10 percent of the manholes at that time as well. The Village will continue to inspect properties for illegal sump pump connections to the sanitary sewer when replacing water meters. The Village will evaluate and update CMOM goals each year when passing a CMAR resolution.

Did you accomplish them?

- Yes
- No

If No, explain:

Organization [NR 210.23 (4) (b)]

Does this chapter of your CMOM include:

- Organizational structure and positions (eg. organizational chart and position descriptions)
- Internal and external lines of communication responsibilities
- Person(s) responsible for reporting overflow events to the department and the public

Legal Authority [NR 210.23 (4) (c)]

What is the legally binding document that regulates the use of your sewer system?

Regulation of Sewer Use and User Rates

If you have a Sewer Use Ordinance or other similar document, when was it last reviewed and revised? (MM/DD/YYYY) 2009-12-22

Does your sewer use ordinance or other legally binding document address the following:

- Private property inflow and infiltration
- New sewer and building sewer design, construction, installation, testing and inspection
- Rehabilitated sewer and lift station installation, testing and inspection

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- Sewage flows satellite system and large private users are monitored and controlled, as necessary
- Fat, oil and grease control
- Enforcement procedures for sewer use non-compliance
- Operation and Maintenance [NR 210.23 (4) (d)]

Does your operation and maintenance program and equipment include the following:

- Equipment and replacement part inventories
- Up-to-date sewer system map
- A management system (computer database and/or file system) for collection system information for O&M activities, investigation and rehabilitation
- A description of routine operation and maintenance activities (see question 2 below)
- Capacity assessment program
- Basement back assessment and correction
- Regular O&M training

- Design and Performance Provisions [NR 210.23 (4) (e)]

What standards and procedures are established for the design, construction, and inspection of the sewer collection system, including building sewers and interceptor sewers on private property?

- State Plumbing Code, DNR NR 110 Standards and/or local Municipal Code Requirements
- Construction, Inspection, and Testing
- Others:

- Overflow Emergency Response Plan [NR 210.23 (4) (f)]

Does your emergency response capability include:

- Responsible personnel communication procedures
- Response order, timing and clean-up
- Public notification protocols
- Training
- Emergency operation protocols and implementation procedures
- Annual Self-Auditing of your CMOM Program [NR 210.23 (5)]

- Special Studies Last Year (check only those that apply):

- Infiltration/Inflow (I/I) Analysis
- Sewer System Evaluation Survey (SSES)
- Sewer Evaluation and Capacity Management Plan (SECAP)
- Lift Station Evaluation Report
- Others:

## 2. Operation and Maintenance

2.1. Did your sanitary sewer collection system maintenance program include the following maintenance activities? Complete all that apply and indicate the amount maintained.

Cleaning	10	% of system/year
Root removal	0	% of system/year
Flow monitoring	0	% of system/year
Smoke testing	0	% of system/year
Sewer line televising	10	% of system/year
Manhole inspections	10	% of system/year

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Lift station O&M	<input type="text" value="365"/>	# per L.S./year
Manhole rehabilitation	<input type="text" value="0"/>	% of manholes rehabbed
Mainline rehabilitation	<input type="text" value="0"/>	% of sewer lines rehabbed
Private sewer inspections	<input type="text" value="0"/>	% of system/year
Private sewer I/I removal	<input type="text" value="0"/>	% of private services
River or water crossings	<input type="text" value="0"/>	% of pipe crossings evaluated or maintained

Please include additional comments about your sanitary sewer collection system below:

### 3. Performance Indicators

3.1 Provide the following collection system and flow information for the past year.

<input type="text" value="48.28"/>	Total actual amount of precipitation last year in inches
<input type="text" value="32.0"/>	Annual average precipitation (for your location)
<input type="text" value="5.7"/>	Miles of sanitary sewer
<input type="text" value="1"/>	Number of lift stations
<input type="text" value="0"/>	Number of lift station failures
<input type="text" value="1"/>	Number of sewer pipe failures
<input type="text" value="1"/>	Number of basement backup occurrences
<input type="text" value="0"/>	Number of complaints
<input type="text"/>	Average daily flow in MGD (if available)
<input type="text"/>	Peak monthly flow in MGD (if available)
<input type="text"/>	Peak hourly flow in MGD (if available)

3.2 Performance ratios for the past year:

<input type="text" value="0.00"/>	Lift station failures (failures/year)
<input type="text" value="0.18"/>	Sewer pipe failures (pipe failures/sewer mile/yr)
<input type="text" value="0.00"/>	Sanitary sewer overflows (number/sewer mile/yr)
<input type="text" value="0.18"/>	Basement backups (number/sewer mile)
<input type="text" value="0.00"/>	Complaints (number/sewer mile)
<input type="text"/>	Peaking factor ratio (Peak Monthly:Annual Daily Avg)
<input type="text"/>	Peaking factor ratio (Peak Hourly:Annual Daily Avg)

### 4. Overflows

#### LIST OF SANITARY SEWER (SSO) AND TREATMENT FACILITY (TFO) OVERFLOWS REPORTED \*\*

Date	Location	Cause	Estimated Volume
None reported			

\*\* If there were any SSOs or TFOs that are not listed above, please contact the DNR and stop work on this section until corrected.

### 5. Infiltration / Inflow (I/I)

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5.1 Was infiltration/inflow (I/I) significant in your community last year?

Yes

No

If Yes, please describe:

5.2 Has infiltration/inflow and resultant high flows affected performance or created problems in your collection system, lift stations, or treatment plant at any time in the past year?

Yes

No

If Yes, please describe:

5.3 Explain any infiltration/inflow (I/I) changes this year from previous years:

No changes.

5.4 What is being done to address infiltration/inflow in your collection system?

Televising 10% of their sewer collection system each year to locate any I/I issues.

<b>Total Points Generated</b>	0
<b>Score (100 - Total Points Generated)</b>	100
<b>Section Grade</b>	<b>A</b>

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## Grading Summary

WPDES No: 0028061

SECTIONS	LETTER GRADE	GRADE POINTS	WEIGHTING FACTORS	SECTION POINTS
Influent	A	4	3	12
BOD/CBOD	A	4	10	40
TSS	A	4	5	20
Ammonia	B	3	5	15
Phosphorus	C	2	3	6
Biosolids	A	4	5	20
Staffing/PM	A	4	1	4
OpCert	A	4	1	4
Financial	A	4	1	4
Collection	A	4	3	12
<b>TOTALS</b>			<b>37</b>	<b>137</b>
<b>GRADE POINT AVERAGE (GPA) = 3.70</b>				

### Notes:

- A = Voluntary Range (Response Optional)
- B = Voluntary Range (Response Optional)
- C = Recommendation Range (Response Required)
- D = Action Range (Response Required)
- F = Action Range (Response Required)

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## Resolution or Owner's Statement

Name of Governing  
Body or Owner:

Date of Resolution or  
Action Taken:

Resolution Number:

Date of Submittal:

### ACTIONS SET FORTH BY THE GOVERNING BODY OR OWNER RELATING TO SPECIFIC CMAR SECTIONS (Optional for grade A or B. Required for grade C, D, or F):

Influent Flow and Loadings: Grade = A

Effluent Quality: BOD: Grade = A

Effluent Quality: TSS: Grade = A

Effluent Quality: Ammonia: Grade = B

Effluent Quality: Phosphorus: Grade = C

Biosolids Quality and Management: Grade = A

Staffing: Grade = A

Operator Certification: Grade = A

Financial Management: Grade = A

Collection Systems: Grade = A

(Regardless of grade, response required for Collection Systems if SSOs were reported)

### ACTIONS SET FORTH BY THE GOVERNING BODY OR OWNER RELATING TO THE OVERALL GRADE POINT AVERAGE AND ANY GENERAL COMMENTS

(Optional for G.P.A. greater than or equal to 3.00, required for G.P.A. less than 3.00)

**G.P.A. = 3.70**