

Wisconsin Department of Natural Resources SWIMS Project Summary

General Project Information

Project ID: AIMC-009-12
Name: LEGEND LAKE P & R DISTRICT: Legend Lake Permit Fee Reimbursement
Type: Aquatic Invasives Grant
Subtype: Aquatic Invasives Maintenance and Containment
Status: COMPLETE
Start Date: 12/19/2011
End Date: 12/19/2011
Purpose: Permit fee reimbursement for the maintenance and containment of aquatic invasive species on Legend Lake.
Objective:
Comments: Grantee is LEGEND LAKE P & R DISTRICT
Outcome:
Study Design:
QA Measures:

People

Name	Role	Status	Start Date	End Date	Organization	Comments
Legend Lake P & R District,	GRANT_RECIPII	COMPLETE	12/19/2011	12/19/2011	Legend Lake P & R District	

Project Statuses

Date	Reported By	Status	Comments
------	-------------	--------	----------

Actions

Action	Detailed Description	Start	End Date	Status
Grant Awarded	339900 Skice Lake	12/19/2011	12/19/2011	COMPLETE
Grant Awarded	340200 Pestiga Lake	12/19/2011	12/19/2011	COMPLETE
Grant Awarded	340100 Spring Lake	12/19/2011	12/19/2011	COMPLETE
Grant Awarded		12/19/2011	12/19/2011	COMPLETE
Grant Awarded	341000 Pywaosit Lake	12/19/2011	12/19/2011	COMPLETE
Grant Awarded	340500 Blacksmith Lake	12/19/2011	12/19/2011	COMPLETE
Grant Awarded	340400 Little Blacksmith Lake	12/19/2011	12/19/2011	COMPLETE

Monitoring Stations

Station ID	Name	Comments
------------	------	----------

Assessment Units

WBIC	Segment	Local Name	Official Name
------	---------	------------	---------------

Lab Account Codes

Account Code	Description	Start Date	End Date
--------------	-------------	------------	----------

Forms

Form Code	Form Name
-----------	-----------

Wisconsin Department of Natural Resources SWIMS Project Summary

Methods

Method Code	Description
-------------	-------------

Fieldwork Events

Start Date	Status	Field ID	Station ID	Station Name
------------	--------	----------	------------	--------------

Documents

Title	Description	Author	Published	Comments
-------	-------------	--------	-----------	----------

Budget

Combined Budgets:

Combined SLOH:

Combined Total:

Funding

Organization	Source	Type	Amount	Start Date	End Date
--------------	--------	------	--------	------------	----------