

PERMIT #: \_\_\_\_\_

**Upper Minnesota River Watershed District**  
**APPLICATION FOR PERMIT**  
*PERMIT APPROVAL IS NECESSARY BEFORE WORK BEGINS*

211 2<sup>nd</sup> Street SE  
Ortonville, MN 56278

Phone: 320-839-3411  
Fax: 320-839-3313

Name of Applicant(s): \_\_\_\_\_ Phone #: \_\_\_\_\_

Address: \_\_\_\_\_

Name of owner if other than applicant: \_\_\_\_\_

Project Location \_\_\_ 1/2 \_\_\_ 1/4 \_\_\_ 1/4 Township: \_\_\_\_\_ Section: \_\_\_\_\_

Project Location \_\_\_ 1/2 \_\_\_ 1/4 \_\_\_ 1/4 Township: \_\_\_\_\_ Section: \_\_\_\_\_

County where work is to be done:  Big Stone  Lac qui Parle  Stevens  Swift  Traverse

Permit requested for (check one or more which pertain to the project):

Seepage Lines  Main Tile  Clean Ditch  New Ditch  Restore/Cleanout Waterway

Install/Replace Culvert  Pump  Other: \_\_\_\_\_

*(An aerial photo must be attached with scale drawing of project, NRCS Conservation determination, and/or other data to support permit application.)*

Proposed draining outlets into: \_\_\_\_\_

Assessed to County Ditch #: \_\_\_\_\_ Will proposed work affect any property other than where work will be done? For instance adjoining property where water will be outletting?  Yes  No

If yes, who: \_\_\_\_\_ Signature: \_\_\_\_\_

*(Signature of affected landowner required.)*

Will the installation require crossing a county, state, or township roadway or outlet into the right-of-way?

No  Yes County Engineer/Township Official Signature: \_\_\_\_\_

*(Signatures of County or Township official required before work can proceed.)*

Is the proposed drainage area involved in a farm program?  Yes  No

Have you completed a 1026?  Yes  No Will any wetlands be affected?  Yes  No

Has the proposed project area been planted by July 5<sup>th</sup> the past eight out of 10 years?  Yes  No

I hereby make application for a permit to proceed with the proposal described above and have attached all supporting maps, plans, and other information submitted with this application. The information submitted and statements made concerning this application are true and correct to the best of my knowledge.

*Upon completion of the work, I will submit an as-built drawing of the project to the UMRWD office.*

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

COMMENTS AND/OR SPECIAL PROVISIONS: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

(Watershed Manager Signature)

Permission is granted to do work in accordance with the purposes and overall plan of the District. **This permit is valid for one year from the date of Board action.** This permit only applies to the permitting authority of the Upper Minnesota River Watershed District under Minnesota 103.D. The applicant is responsible for complying with all other agencies and governmental permits and regulations, including but not limited to DNR, Corps of Engineers, NRCS, WCA, and FSA rules, permits and regulations.