

Permit Application Form

Upper Minnesota River Watershed District

211 2nd Street SE, Ortonville, MN 56278 - Phone: 320-839-3411 - Fax: 320-839-3313

Applicant Name: _____

Phone: _____

Address: _____

Email: _____

Project Location

County: _____

Parcel # _____

Township Name: _____

Section #: _____

Quarter: _____

(Example: S 1/2 of SW 1/4)

Township Name: _____

Section #: _____

Quarter: _____

Project Type

Tiling

Ditch Maintenance

Repair/Replace Tile

Repair/ Place Culvert

Aerial photo of the designed project, with all project features clearly labeled must be attached

Other: _____

Please describe in detail the purpose of the project and the work to be performed

Describe the outlet of the project

Downstream Signatures:

must be obtained from landowners downstream of your project (please contact the UMRWD office if you have questions)

Applicant Signature: _____ **Date:** _____

UMRWD Comments and/or special provisions: _____

UMRWD Approval*: _____ Date: _____

*Permission is granted to do work in accordance with the purposes and overall plan of the UMRWD. This permit is valid for the construction of projects described in this permit only, for one year from the date of approval. 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 local, state and federal agencies and governmental permits and regulations.