



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

# Permit Application Form

Upper Minnesota River Watershed District

211 2<sup>nd</sup> 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 three years 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.