

LOCAL--STATE--FEDERAL PROJECT NOTIFICATION FORM

You may use this form to notify the Minnesota Department of Natural Resources, the Army Corps of Engineers, and your county and municipal offices of a project or work you propose which may fall within their jurisdiction. These agencies should advise you of their jurisdiction, if any, within 45 days of receipt of this notification. This form is provided as a convenience and its use is optional. You may, if you wish, apply for permits or authorizations using standard agency forms. Fill out this form completely and mail a copy, with plans, maps, etc. to each of the agencies listed on the reverse of the form. Keep a copy of all materials submitted for your records. You must obtain all required authorizations before beginning work. Violations of local, State, or Federal laws may be punishable by administrative, civil and/or criminal penalties.

I. Applicant's Name (First, Last, M.I.) / Authorized Agent, if any / Area Code, Telephone
/ / ()

Address (Street, RFD, Box Number, City, State, Zip Code)

II. LOCATION OF PROPOSED PROJECT (ATTACH DRAWING SHOWING HOW TO GET TO SITE)

Government lot(s) Quarter Section(s) Section(s) No. Township(s) No. Range(s) No. Lot, Block, Subdivision

Fire No., Box No., or Project Address County Work will affect ___lake ___wetland ___waterway ___ag production
Waterbody Name, No. (if known)

III. ESTIMATED PROJECT COST: \$ LENGTH OF SHORE AFFECTED (in feet):

IV. Volume of fill or excavation (cubic yds.): Area filled or excavated is acres, or square feet.
(NOTE: You may substitute dimensions)

V: TYPE OF WORK AND AREA (Check all that apply): ___FILL ___EXCAVATE ___REPAIR ___CONSTRUCT
___REMOVE ___DRAIN ___DAM
___SHORELINE ___WETLAND ___WATERWAY ___DOCK ___CULVERT ___BRIDGE ___LAKE
___ACCESS PATH ___RIPRAP ___SAND BLANKET OTHER (describe):

WETLAND TYPE(S) AND ACREAGE(S) PROPOSED TO BE FILLED/DRAINED:
Attach drawings and plans. Include a description of any proposed compensatory mitigation. Important: Identify any disposal and borrow areas.
Describe the work below; how it would be done, what equipment would be used:

VI. PROJECT PURPOSE (why is this project needed--what benefits will it provide?):

VII. ALTERNATIVES (describe any other sites or methods that could be used to achieve the purpose of your project while avoiding or minimizing wetland/water impacts: Attach additional sheets, if needed).

VIII. DATES-- Activity proposed to begin on: Be completed:
Has any of the work been done? NO ___ YES ___ (identify any completed work on drawing).

IX. ADJOINING PROPERTY OWNERS (Attach list if more than two).
Name Address City State Zip

1. _____
2. _____

X. PERMITS have been received (enter an R) or already applied for (enter an A) from: ___DNR ___ARMY CORPS
___COUNTY ___TOWN/CITY ___WATERSHED DISTRICT ___MN. POLLUTION CONTROL AGENCY.
Has an archaeological survey of the project site been done? ___ If so, by whom: _____

XI. I hereby notify the recipients of this form of the project proposed herein and request that I be advised of any permits or other determinations concerning this project that I must obtain. I understand that proceeding with work before all required authorizations are obtained may subject me to Federal, State, and/or local administrative, civil and/or criminal penalties.

DATE: _____

Signature of Person Proposing Project or Agent

<<< PLEASE CAREFULLY READ AND COMPLETE BACK OF FORM >>>

INSTRUCTIONS—PLEASE READ CAREFULLY

A copy of this form, with copies of all plans, drawings, etc., should be sent to each agency indicated below. Please check the appropriate spaces below to show everywhere you are sending this form. Remember to keep a copy for yourself. DO NOT SEND ANY PERMIT PROCESSING FEES WITH THIS FORM.

____ MUNICIPAL GOVERNMENT (CITY OR TOWN) OR COUNTY ZONING OFFICE. SEND TO COUNTY IF YOUR PROJECT SITE IS NOT IN A MUNICIPAL AREA. PLEASE LIST THE MUNICIPALITY OR COUNTY TO WHICH YOU ARE SENDING THE FORM: _____

____ WATERSHED DISTRICT OFFICE (IF ONE EXISTS FOR YOUR PROJECT AREA).
PLEASE LIST DISTRICT OFFICE NAME: _____

____ MINNESOTA DEPT. OF NATURAL RESOURCES REGIONAL OFFICE.

____ YOUR LOCAL SOIL AND WATER CONSERVATION DISTRICT.

____ U.S. ARMY CORPS OF ENGINEERS. SEND TO:

Department of the Army, Corps of Engineers, St. Paul District,
ATTN: CO-R, 180 Kellogg Blvd. E., Room 1421, St. Paul, MN 55101-1479

Note: The above agencies may provide a copy of your completed form to the Minnesota Pollution Control Agency (MPCA). MPCA water quality rules may apply to your proposal.

ATTENTION! FROM USDA: Any activity including drainage, dredging, filling, leveling or other manipulations, including maintenance, may affect a landuser's eligibility for USDA benefits under the 1985 Food Security Act as amended. Check with your local USDA office to request and complete Form AD-1026 prior to initiating activity.

IMPORTANT: Some of the above offices may allow this form to be used as a permit application form. The Corps of Engineers will accept this form as an application form. If you wish this form to constitute an application to the Corps of Engineers for any necessary permits for your project under Section 10 of the Rivers and Harbors Act of 1899, and/or under Section 404 of the Clean Water Act, please carefully read the following information and sign where indicated below.

Application is hereby made for a permit or permits to authorize the activities described herein. I certify that I am familiar with the information contained in this application, and that to the best of my knowledge and belief such information is true, complete, and accurate. I further certify that I possess the authority to undertake the proposed activities or I am acting as the duly authorized agent of the applicant.

Signature of Applicant

Date

Signature of Agent

Date

NOTE: The application must be signed by the person who desires to undertake the proposed activity (applicant) or it may be signed by a duly authorized agent if the information requested below is provided.

Agent's Name: _____ Agent's Title: _____

Address: _____

Telephone: () _____

18 U.S.C. Section 1001 provides that: Whoever, in any manner within the jurisdiction of any department or agency of The United States knowingly and willfully falsifies, conceals, or covers up by any trick, scheme, or device a material fact or makes any false, fictitious or fraudulent statements or representations or makes or uses any false writing or document knowing same to contain any false, fictitious, or fraudulent statement or entry, shall be fined not more than \$10,000 or imprisoned not more than five years, or both.

DO NOT SEND ANY PERMIT PROCESSING FEES WITH THIS FORM

