APPLICATION FOR PERMIT RED LAKE WATERSHED DISTRICT

1000 Pennington Avenue South, Thief River Falls, MN 56701 RLWD@redlakewatershed.org 218-681-5800

Landowner Name:	Telephone Number:								
Address (Street, RFD, Box N	To., City, State, Zip):								
Project Location: Government Lot	Quarter Se	ection(s)	Section(s)						
Township (Name & #)		Range #	Coun	nty					
Type of Work Proposed: [] Excavate [] Fill [] Drain [] Construct	[] Install [] Remove [] Other []	[] Ditch [] Culvert (Siz [] Bridge (Size [] Dam		[] Dike [] Erosion Control [] Tile [] Other					
Be sure to attach all necessary	reports, maps, drawin	gs, photos, other data	, etc., to suppo	ort permit application.					
Description of work to be do Estimated drainage area: acr		mile(s)							
Work is necessary because:	-								
plans, and other information s	ubmitted with this app ct to the best of my l	olication. The information of th	ation submitte ag a permit fr	and have attached all supporting med and statements made concerning om the Managers does not relieve nits required by law.	g this				
Signature of landowner:			Date	e:					

For Office Use Only P.A. No.

Red Lake Watershed District

Permit Application Plat Map

Applicant:					Permit #:For Office Use Only							
County:						Twp. (name & #):						
Please identify below the general location of proposed work. Use reverse side of this map for a detailed description of work in the appropriate Section(s).												or a