Rock County SWCD/Land Mgt Local Notification Form for
Drainage/Wetland Projects

1. Landowner/Applicant Contact Information (must have all information completed)
   Name: ________________________________
   Address: ____________________________________________
   Phone: Home ___________________________ Cell: ____________

2. Project Location
   Township: ___________________ Section: __________ Quarter: __________

3. Project Purpose, Description and Dimensions: Describe what you plan to do and why it is needed, how you plan to
   construct the dimensions (length, width, depth), area of impact, and when you propose to construct the project.
   Please be very specific.

   ____________________________________________________________

   *****Attached Map with Specific Project Information Required*****

   ****Project approvals and denials based on information provided in this form and the project map drawn. Additional
   work done by applicant/landowner that is not included in this application can be considered a violation****

4. I am providing information needed for a local notification for the work described in this notification. I am familiar
   with the information contained in this application. To the best of my knowledge and belief, all information is true,
   complete and accurate. I possess the authority to undertake the work described, or I am acting as the duly
   authorized agent of the applicant.

   ________________________________ ________________________________
   Signature of applicant (Landowner) Date

FOR LGU USE ONLY:

   Determination for Part 1:  
   □ No WCA Jurisdiction
   □ Exempt: No. ___ (per MN Rule 8420.0122)
   □ No Loss: _____ (A.B. . . G. per MN Rule 8420.0220)
   □ Wetland Boundary or type
   □ Replacement required – applicant must complete Part II

   Application is (check one):  □ Approved  □ Approved with conditions (conditions attached) □ Denied

   Comments/Findings: ____________________________________________________________

   ________________________________ ________________________________
   Signature Date

   311 W Gabrielson, Luverne, MN 56156. (507)283-8862 ext 3

   ****Approvals and denials are specific to the project described and drawn on the required attached map.****
   ****If more information is needed for determination a written request will be sent within 15 business days****
   ****This does not constitute an official WCA Determination, If you want an Official Determination Contact the LGU
   and request an Official State Application****

   *This Local Determination does not give approval for any additional Federal/State/Watershed District/County Permits*