

Lower Minnesota River Watershed District Municipal (LGU) Permit Application Form

**Return Application to:**  
**Lower Minnesota River Watershed District**  
112 E. 5<sup>th</sup> Street, #104  
Chaska, Minnesota 55318  
Phone: (763) 545-4659  
Email: [naiadconsulting@gmail.com](mailto:naiadconsulting@gmail.com)

**To be completed by District:**

Permit number \_\_\_\_\_  
Date Approved \_\_\_\_\_  
Permit Expiration Date \_\_\_\_\_

**What is this submission? Choose one:**

- This is a request for a preliminary discussion regarding adherence to the District's rules
- This is an application for a general District permit

**Contact Information:**

\_\_\_\_\_  
Name of municipal contact

\_\_\_\_\_  
Municipality

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Email

**Submittal Requirements**

A complete LGU application must be submitted to the District on or before February 7, 2020, allowing 60 business days for District review. In addition to the completed application, LGU's are asked to submit locations of or information from its local water management plan, ordinance (s), capital improvement program and/or regulatory framework that supports compliance with applicable rules. These documents can be submitted electronically to the District. For more information, see the District's rules which can be found on the District website at [www.lowermnrivewd.org](http://www.lowermnrivewd.org).

Please identify which rule(s) are addressed by the information included with this application:

- Erosion and Sediment Control Rule
- Floodplain and Drainage Alteration Rule
- Stormwater Management Rule
- Steep Slopes Rule
- Unable to implement these rules. Attach explanation with application form.

**Applicant Signature**

"I certify that I am a City Administrator, Water Resources Engineer, or designated City staff upon authorizing action of the LGU's governing board or council. I understand that, as the permittee, I am legally accountable to ensure compliance with the terms and conditions of the permit. I authorize the District, and its agents, employees, officers, and contractors, to conduct periodic audits and/or inspections of LGU programs, project approvals, permits, and other processes to assess conformance with the general permit, the standards identified in the Plan, and these Rules."

**"I certify that I have thoroughly read and understand the above information."**

\_\_\_\_\_  
Signature of authorized municipal representative

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name