



**PROJECT REVIEW APPLICATION**

*Submittal deadline is 10 days prior to the Commissions' meetings, which are held monthly on the second Thursday.*

This project is in the  Shingle Creek Watershed  West Mississippi Watershed (check one)

**OWNER**

Name \_\_\_\_\_  
 Address \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Phone \_\_\_\_\_  
 E-mail \_\_\_\_\_

**NATURE OF REVIEW**

(check all that apply)  
 Wetland Alteration (DNR Protected or WCA Regulated with Commission Designated LGU)  
 Floodplain Alteration  
 Stormwater Management Plan  
 Other \_\_\_\_\_

**PROJECT INFORMATION**

Name \_\_\_\_\_  
 Location \_\_\_\_\_  
 \_\_\_\_\_  
 Area of Property \_\_\_\_\_ acres  
 Project Description: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**FEES** (see fee schedule)

Project Review Fee \$ \_\_\_\_\_

**PROJECT ENGINEER**

Name \_\_\_\_\_  
 Company \_\_\_\_\_  
 Address \_\_\_\_\_  
 \_\_\_\_\_  
 Phone \_\_\_\_\_  
 Fax \_\_\_\_\_  
 Email \_\_\_\_\_

**AUTHORIZATION - to be prepared by City**

Requested by City of \_\_\_\_\_  
 Signature \_\_\_\_\_  
 Name \_\_\_\_\_  
 Title \_\_\_\_\_  
 Date \_\_\_\_\_

**Send copy of application, completed checklist, application fee, and project materials to:**

Shingle Creek **OR** West Mississippi Watershed Management Commission  
 7500 Olson Memorial Highway, Suite 300  
 Golden Valley, MN 55427  
 Phone: 763-252-6800 • Fax: 952-831-1268  
 Email: [ematthiesen@wenck.com](mailto:ematthiesen@wenck.com)