

WEST MISSISSIPPI WATERSHED
MANAGEMENT COMMISSION

PROJECT REVIEW APPLICATION



OWNER

Name _____

Address _____

Phone _____

NATURE OF REVIEW

Wetland Alteration
*(DNR Protected or WCA Regulated with
Commission Designated LGU)*

Floodplain Alteration

Stormwater Management Plan
*(Sites >5 acres for non-single family or >15
acres for single family detached)*

Other _____

PROJECT INFORMATION

Name _____

Location _____

Area of Property _____ Acres

Project Description _____

Fees

Project review fee \$ _____

\$2,000 escrow for variance application

\$1,500 escrow for wetland replacement plan
when Commission is LGU

Project Engineer

Name _____

Company _____

Phone _____

Fax _____

AUTHORIZATION - To be completed by City

Requested by City of _____

Signature _____

Name _____

Title _____

Date _____

Send completed application to:

West Mississippi Watershed Management Commission
c/o Wenck Associates, Inc.

1800 Pioneer Creek Center

PO Box 249

Maple Plain, MN 55359-0249

Ph: 763-479-4200

Fax: 763-479-4242

Include with application grading plan with erosion
control, stormwater calculations, fees or escrows,
mitigation plans, and other related information.