**Shoreland Alteration Permit**

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<tr>
<th>Township</th>
<th>Lake / Waterbody</th>
<th>Parcel ID Number</th>
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**APPLICANT INFORMATION**

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<tr>
<th>Name:</th>
<th>Mailing Address:</th>
<th>City:</th>
<th>State</th>
<th>Zip:</th>
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Phone #: _______ Alternative Contact Info: _______

**PROPERTY INFORMATION**  (if different than above)

<table>
<thead>
<tr>
<th>Owner’s Name:</th>
<th>Site Address:</th>
<th>City:</th>
<th>State</th>
<th>Zip:</th>
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Phone #: _______ Email Address: _______

Contractor: _______ Phone #: _______

**Type of Alteration**

- [ ] Riprap
- [ ] Retaining Wall
- [ ] Vegetative
- [ ] Sand Blanket
- [ ] Connection to Public Water
- [ ] Shoreland Access (ex: stairs)
- [ ] Topographic
- [ ] Watercraft Access
- [ ] Other: _______

Area to be altered (ft): _______ Length _______ Width _______.

Type and amount of material to be placed/excavated in cubic yards: _______ cu.yds.

Distance from OHW: _______ ft. Is any part of this project extending below the OHWL? Y / N

**Describe in detail the proposed project and its purpose:** _______

**Describe the erosion control measures you intend to use:** _______

**FEE SCHEDULE:**

- Shoreland Alteration Permit Fee: $200.00
- Shoreland Access Permit Fee: $150.00

Updated 12/23/2019
Depending on your project, it may be beneficial to include a side profile sketch. Attach additional sheets if necessary.
SHORELAND IMPACT QUESTIONS

1.) Is the proposed project located within shore or bluff impact zones or moderate to severe slopes?  
   % slope at project site: _________
   Y / N

2.) Will there be lights incorporated into this project?
   Y / N

3.) Will this project increase the square footage of impervious surfaces to over 25% of the lot?
   Existing % of impervious surface: _________
   Y / N

4.) Will the proposed project result in a net loss of wildlife habitat on the property?
   If yes, explain:
   Y / N

5.) Will the proposed project reduce vegetative screening of structures on the lot from the water?
   If yes, explain:
   Y / N

6.) Will the proposed project be consistent with the character of the neighboring properties?
   If no, explain:
   Y / N

7.) Will the proposed project result in an intensification of use in the shore impact zone?
   If yes, explain:
   Y / N

8.) Is there an alternative project that could serve the same purpose with less impact?
   Explain:
   Y / N

9.) Will the proposed project result in an increase in runoff to surface waters or adjoining properties?
   If yes, explain:
   Y / N

10.) If your project is extending below the OHWL, have you contacted the MN DNR?
     Little Falls DNR: 320-232-1060
     Y / NA

I acknowledge that all information provided for application review, including required sketch plans, is complete and accurate; that the work will be in conformance with all applicable Zoning Ordinances; that I understand this is not a permit, but only an application for a permit, and work is not to start without a permit; and the work will be in accordance with the approved plan. I also understand that by submitting this application, I am consenting to allow the Director (or SWCDD employees) to inspect and verify that all information in the application is complete and correct; and to conduct inspections before, during, and after construction and/or installation for compliance with the permit and the Todd County Zoning Ordinance.

Applicant’s Signature: ___________________________________________  Date: ____________________

Updated 12/23/2019
SITE EVALUATION

Before any shoreland alteration permits are issued, P&Z staff must conduct a site evaluation. If you cannot meet the P&Z staff onsite, please flag off the area you intend to alter in order to assist P&Z staff in evaluating your site. Please contact the P&Z office when the permitted project is completed.

***For Todd County Use Only***

**Application Process**

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<thead>
<tr>
<th>Date Received:</th>
<th>By:</th>
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<tr>
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<tr>
<td>Receipt Number:</td>
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<td>Permit Number:</td>
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**Site Evaluation**

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<tr>
<th>Date:</th>
<th>Pictures: Y / N (attach)</th>
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<td>Staff Member(s):</td>
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**Notes and/or Special Requirements:**