

# LAKE SHORELINE STABILIZATION PERMIT APPLICATION FORM

**MINNEHAHA CREEK WATERSHED DISTRICT (MCWD)**  
**15320 MINNETONKA BLVD.**  
**MINNETONKA, MN 55345**

**Ph: 952-471-0590**  
**Fax: 952-471-0682**

**1. Property owner information:**

Name of each property owner: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone: \_\_\_\_\_

**2. Contracting company information:**

Business Name: \_\_\_\_\_ Representative Name: \_\_\_\_\_

Business Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Ongoing performance bond with MCWD:  Yes  No Bond Number: \_\_\_\_\_

**3. Project Details:**

Project address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

County: \_\_\_\_\_ Property ID number (PID): \_\_\_\_\_

Type of Project:  Vegetative restoration  Bioengineering  Riprap  Retaining wall

In-kind replacement:  Yes  No Erosion intensity score (if not in-kind replacement): \_\_\_\_\_

Located on lake: \_\_\_\_\_ Length of shoreline affected: \_\_\_\_\_ (lineal feet)

Describe any existing structure along shoreline: \_\_\_\_\_

Access to project site by:  Ice  Barge  Upland corridor

Financial assurance bond acquired:  Yes  No (If **not** an ongoing performance bond please fill out next page)

By signing below, I hereby request a permit to authorize the activities described herein. I certify that I am familiar with MCWD Rules and that the proposed activity will be conducted in compliance with these Rules. I am familiar with the information contained in the application and, to the best of my knowledge and belief, all information is true, complete and accurate. I understand that proceeding with work before all required authorizations are obtained may be subject to federal, state and/or local administrative, civil and/or criminal penalties.

\_\_\_\_\_  
Signature of property owner or contracting representative

\_\_\_\_\_  
Date

