



Permit Application- Culvert/Bridge

Return application to: Cedar River Watershed District (CRWD) 1408 21 st Ave. NW, Suite #2 Austin, MN 55912 Phone: (507) 434-2603 FAX: (507) 434-2680	To be completed by District: Application number: _____ Amount Received: _____ Date: _____ Received From: _____ Action Required by (Date): _____
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A Fee of \$10 must be included with the permit application for administrative costs.

This form notifies the Cedar River Watershed District (CRWD) and their engineering consultants of a proposed project, which may fall within their jurisdiction. Nothing within the CRWD rules removes the requirements of other permits or authorizations from other local, state or federal agencies. Fill out this form and return to the CRWD location listed above. You must include site plan, maps, etc.

ALL REQUIRED AUTHORIZATIONS MUST BE OBTAINED BEFORE WORK BEGINS

The intent of the CRWD Rules is to maintain existing flows and improve water quality throughout the entire Cedar River Watershed

Property Owner Name (First, Last): _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Email Address: _____ Phone: _____

Location of proposed project: _____

County: _____ Township: _____

Section: _____ 1/2 _____ 1/4 _____ 1/4 _____ Lot: _____

Proposed Work and Rule Applicability (check all that apply):

Culvert Replacement
New Culvert/Bridge (Circle)

Bridge Replacement

Project Description:

The diameter/square footage of the existing culvert/bridge _____

The diameter/square footage of the proposed culvert/bridge _____

Will this project be reducing, maintaining, or increasing downstream flows? _____

Permit Requirements

If the proposed bridge or culvert is different than the existing condition, documentation must be provided that shows there will be no net increase to existing flows (plans and hydrological analyses). The application will not be considered complete until the CRWD is provided with this information. **Initial:** _____

I understand that the CRWD requires erosion control measures to be installed wherever applicable upon installation of the new structure (grass seeding, erosion control fabric, etc). **Initial:** _____

Projected Timeline: Start Date: _____ Completion Date: _____

Contractor, Engineer, or Representative's Name: _____

Business Name: _____ Email Address: _____

Business Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Cell: _____

Names and addresses of downstream landowner if required by CRWD (Attach separate sheet if necessary):

Name: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

Signature of Immediate Downstream Landowner(s) Date

NOTE: This application must be signed by the property owner where the proposed activity is to occur. It should be noted, filling in the application and signing below will give CRWD permission for initial site inspection, in-progress inspections and any others that may be deemed necessary. Applicant signature acknowledges that the information provided on this form is accurate to the applicant's best knowledge.

Signature of Applicant (Property Owner) Date