

GRANT COUNTY
APPLICATION TO DRAIN

APPLICATION DATE: _____ PERMIT NUMBER: _____

APPLICANT: (PRINT) _____ PHONE: _____

ADDRESS: _____

OWNER (PRINT): _____ PHONE: _____

IF DIFFERENT THAN APPLICANT

LOCATION OF LAND TO BE DRAINED:	PARCEL #:				
	SECTION	TWP	RGE		
	SECTION	TWP	RGE		
	SECTION	TWP	RGE		

LOCATION OF OUTLET END OF PROPOSED DRAIN:	SECTION	TWP	RGE		

GOING INTO THE WATERCOURSE:	MAX SURFACE AREA	AVE DEPTH
LAKE	acres	ft
SLOUGH	acres	ft
POND	acres	ft
DITCH	DRAIN	
DRAW	NATURAL RUN	

DRAINAGE DITCH:		OR	DRAINAGE TILE:
DRAIN LENGTH	ft		DRAIN LENGTH
BOTTOM WIDTH	ft		DRAIN DIAMETER
SIDE SLOPE	:1		inches
MAX CUT	ft		

LAND MASS CONTRIBUTING TO RUNOFF TO THE DRAINAGE PROJECT: _____ acres

TOTAL NUMBER OF ACRES IN PROPOSED PROJECT AREA: _____ acres

PURPOSE FOR DRAINING: _____

A DETAILED **MAP** MUST ACCOMPANY THIS FORM SHOWING PROPOSED DRAINAGE PATH & TILE LAYOUT
 ALL OTHER APPROVAL FROM STATE AND FEDERAL AGENCIES MUST BE OBTAINED IN ACCORDANCE WITH ENROLLED
 PROGRAM NEEDS BEFORE CONSTRUCTION BEGINS

CONTACT THE COUNTY COMMISSIONER IN AREA TO DISCUSS PLANS.

LANDOWNER: _____ LANDOWNER: _____
 SIGNATURE: _____ SIGNATURE: _____

PERMIT ISSUED: _____ ZONING OFFICER: _____

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The Board of County Commissioners, acting as the County Drainage Board, has determined:

This application DOES involve drainage of statewide or interdistrict significance.

This application DOES NOT involve drainage of statewide or interdistrict significance.

Date: _____ Drainage Officer: _____

If the Board has determined this application DOES NOT involve drainage of statewide or interdistrict significance, approval by the Board constitutes permit to drain.

This application to drain is hereby:

Approved	<input type="checkbox"/>
Disapproved	<input type="checkbox"/>

Date: _____ Chairman
Grant County Board of Commissioners: _____

If the Board has determined this application DOES involve drainage of statewide or interdistrict significance, approval by the Board of each county affected must be given to constitute a permit to drain.

This application which involves drainage of statewide or interdistrict significance is hereby:

Approved
Disapproved

Date: _____ Chairman
Board of Commissioners: _____

Approved
Disapproved

Date: _____ Chairman
Board of Commissioners: _____

ADJOINING LANDOWNER PERMISSION TO DRAIN

I, _____, give permission to _____
to drain water from an outlet on the property owned by or rented by him and located at _____,
_____ , onto/acrossed my property located at: _____.

(Please use legal descriptions)

Date: _____ Signature of Affected Landowner: _____

Date: _____ Signature of Affected Landowner: _____

TOWNSHIP APPROVAL

The installation requires crossing a Township Road or Highway, review of and permission therefore is granted by signatures of a majority of the township supervisors.

Date: _____ Signature of Township Supervisor: _____

Date: _____ Signature of Township Supervisor: _____

CERTIFY COMPLETE

I have submitted the "**as-built**" final drawings of the completed drainage project for the review of the designated official, and certify the completion of this drainage permit.

Date: _____ Signature of Applicant: _____