

**Minnesota Wetland Conservation Act
APPLICATION FOR
CERTIFICATE OF NO LOSS OR EXEMPTION***

APPLICANT AND PROJECT LOCATION INFORMATION

Name(s) of Applicant _____ Street Address _____ City, State, Zip Code _____ () _____ () _____ Telephone (Day) _____ (Evening) _____	LGU: _____ Project Location: T _____ R _____ S _____ 1/4 _____ 1/4 _____ 1/4 _____ UTM Coordinates: X: _____ Y: _____ County Name/Number: _____ Minor Watershed Name/Number: _____ Size of entire wetland: _____ acres Wetland type: Circular 39 _____; NWI _____ Check one: <input type="checkbox"/> <50% <input type="checkbox"/> 50%-80% or <input type="checkbox"/> > 80% Check one: <input type="checkbox"/> Agricultural land; <input type="checkbox"/> Non-ag. land
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PROPOSED PROJECT DESCRIPTION

Describe the nature and purpose of the proposed project: _____

 _____ (attach additional pages if needed)

Timetable: project will begin on ____ / ____ / ____ (mo/day/yr) and will be completed by ____ / ____ / ____

The wetland activity at the above site qualifies for the following under the Wetland Conservation Act (WCA) (check one):

- No Loss Determination** (attach plans)
- Exemption # _____** (per MN Rule Chapter 8420.0122) *(Note: Applicant is responsible for submitting the proof necessary to show qualification for the exemption claimed.)*

Description of Exemption Claimed:

APPLICANT SIGNATURE

The information provided for this determination is truthful and accurate to the best of my knowledge. I ensure that, in draining or filling the subject wetland under an exemption noted above, appropriate erosion control measures will be taken to prevent sedimentation of the water, the drain or fill will not block fish passage, and the drain or fill will be conducted in compliance with all other applicable federal, state and local requirements, including best management practices and water resource protection requirements established under Minnesota Statutes, Chapter 103H.

 (Signature of Applicant)

 (Date)

Note: Any approval is not effective until signatures below are complete. No work should begin until the 15-day appeal window has lapsed, or, in the event of an appeal, until the appeal has been finalized.

FOR LGU USE ONLY

A.) LGU has received adequate documentation for claim of No-Loss or Exemption, and approves this certificate as outlined above.

_____ This certificate expires _____(Date)

(LGU Official Signature) (Date)

Is certificate for an exemption under M.R. 8420.0122, Subpart 1 or Subpart 2, Item B? LGU sign below.

If not, signature above is sufficient, and certificate is complete. LGU write "Not Applicable" in signature block below.

B.) LGU has received evidence of recording of Declaration of Restrictions and Covenants for Impacted Wetland Under Agricultural Exemption (BWSR Form B):

(County where recorded)

(Date recorded)

(Document # assigned by recorder)

(LGU Official Signature) (Date)

**APPROVAL OF THIS CERTIFICATE ONLY APPLIES TO THE WCA. Permits from local, state, and federal agencies may be required. Check with the appropriate authorities before commencing work in or near wetlands. The Combined Project Application form can be used for this purpose.*

Within 10 days of the decision, notice of the above decision must be mailed to:

Landowner/Applicant

Members of the Technical Evaluation Panel

Department of Natural Resources Regional Office

DNR Wetlands Coordinator @

Ecological Services Section

500 Lafayette Road, Box 25

St. Paul, MN 55155

Corps of Engineers Project Manager @

Department of the Army, Corps of Engineers, St. Paul District

ATTN: CO-R, 190 Fifth Street East

St. Paul, MN 55101-1638

Members of the public who have requested to receive notice.