

Land Alteration Permit Application

Clay County Planning & Zoning
807 11th Street North
Moorhead, MN 56560
Tel (218) 299-5005
planning@co.clay.mn.us

Application Fee: \$50.00

Owner	_____	Parcel # _____
Mailing Address	_____	Permit # _____
City	_____	Date Submitted _____
State, Zip	_____	60 Days _____
Day Phone	_____	Fee \$ _____
Cell Phone	_____	
Email	_____	
Property Address	_____	
Subdivision	_____	Twp _____ Rng _____ Section _____
Legal Description	_____	

Applicant	<input type="checkbox"/> Applicant Same as Owner
Name	_____
Address 1	_____
Address 2	_____
City	_____

State, Zip	_____	
Day Phone	_____	Email _____

- 1) **Project Type:** () Vegetation Removal, () Fill Only, () Grading Only, () Both Grading and Fill
- 2) **Water Resource Data:** Project is Adjacent to: () Lake, () Stream, () Ditch _____(name)
Present Water Level: _____ Ordinary High Water (OHW) Level _____
Highest Known Water Level: _____ 100-Year Flood Level _____
Datum of Elevation: () Sea Level, () Assumed. **NOTE: Any fill below OHW may require DNR permit.**
- 3) **Flood Plain Data:** Is the site in the Flood Plain? _____ IF YES, fill in the remainder of this section.
Is the site in the Floodway? _____ Is the site in the General Flood Plain District? _____
NOTE: A site in the floodway or General Flood Plain District indicates that a problem may exist. A Conditional Use Permit and an Engineering Study will be required in order to determine the impacts on flood elevation and velocity.
- 4) **Project Purpose:** () Clear Land, () Road or Driveway, () Fill in Wetland, () Elevate Building Site,
() Improve Lawn, () Improve Commercial / Industrial Site, () Other _____
- 5) **Project Scope:** Area of Disturbed Ground in acres or sq feet: _____ Volume of Fill in cy: _____ Closest
Distance to OHW in feet: _____ Project Start Date: _____ Project Completion Date: _____
- 6) **Site Characteristics:** Project Soil Type: () Sand, () Gravel, () Clay, () Loam
Fill Type: () Sand, () Gravel, () Clay, () Loam, () Black Dirt, () Demo Material, () Other _____
Average Slope of Area: _____ (feet of rise for each 10 feet of horizontal distance)
Proposed Erosion Control: () Sod, () Stake-Sod, () Seed Only, () Seed and Mulch, () Mulch Only,
() No Control, () Other _____

Indicate on an attached Sketch Plan the location of the land alteration on the site.

To the best of my knowledge, I certify that the information provided on this application and accompanying documents is true and accurate.

Applicant signature: _____ **Date:** _____

Township Office Signature: _____ **Date:** _____