

LAKE OF THE PRAIRIES CONSERVATION DISTRICT



Email: lpcd@mymts.net Phone: (204) 564-2388

Fax: (204) 564-2300

Erosion Control Initiatives

Program Application

LAND OWNER INFORMATION

	LAND OWNER	INFORMATION
Applicant Name:		Phone Number : ()
Mailing Address:		Email:
Project Site: QTR:	SEC: TWP:_	RGE:
Regional Municipality:		Sub-District: (office use only)
Any approved pro	jects not completed by Se	ects expire on September 30, 2015. otember 30, 2015 will become null and void 31, 2015, based on land owner's circumstances.
PROJECT DESCRIPTION: (plear remediation, etc.)	ase include history or problem,	potential causes, anticipated length and with of proposed
_		
	Project	Specifics
Land use adjacent to erosion site	:	
Other Pertinent information:		
Please read all	conditions and responsi	ibilities listed in the attached document.
		e Erosion Control Initiatives program and I agree to abide by the said strict Board in completing and maintaining the project as outlined.
Signature or a	pplicant	Date of Application
	OFFICE U	JSE ONLY
Date Received:	Application #:	Letter sent:
Date Reviewed:	_ Approved:	Board Res. #:
Completed:	Amount Paid:	Cheque #:



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