

Transaction Form to Deposit Credits

Minnesota Wetland Bank Program

If the layout of this form looks incorrect, click on *View*, *Edit Document*, then save it to your computer.

1. Wetland Bank Information							This space is for BWSR use only.		
Bank Name:			Account:			<i>5,</i> .			
Major Watershed:				County:					
Sec:		Twp:		Range:					
LGU:									
Do you want your bank credits to be listed on the BWSR website as available for								r public sale?	Yes No
Is this the final deposit? Yes No									
Are you requesting federal approval for these credits? Yes No									
Corps regulatory number: MVP-									
2. Account Holder Information									
Account Holder Information					Authorized Representative Information				
Name:					Name:				
Organization (if applicable):					Organization (if applicable):				
Address:					Address:				
Phone:					Phone:				
Email:					Email:				
3. Credits to be Deposited									
Credit			30011CG						Credit
Subgroup	Credit Type		Plant Community Type		e Credit		Action	Amounts	
Α									
В									
С									
D									
E		_					1		
· · · · · · · · · · · · · · · · · · ·								Total Credits:	
BSA 1 \$520 BSA 6 \$1,083			the BSA of the account: (Esta			(Establis	ishment/Deposit Fee x total credits)		
BSA 2 \$371 BSA 7 \$1,992						Establishn	nent/Deposit Fee:		
BSA 3 \$725 BSA 8 \$2,577						_,			
BSA 4 \$1,412 BSA 9 \$2,628 BSA 5 \$685 BSA 10 \$3,099							establishm deposits a	deposit is assessed ent fee. All subseq re assessed a depos eposit are not to ex	uent sit fee. Fees

Please make checks payable to the Minnesota Board of Water and Soil Resources. BWSR does not accept cash

BWSR fee policy: http://www.bwsr.state.mn.us/wetlands/wetlandbanking/fee and sales data/Wetland Banking Fee Policy Effective June1 2017.pdf

4. Technical Evaluation Panel Recommendation								
By signing below, the identified agencies and authorized representatives recommend that the identified wetland credits be approved for deposit.								
WCA LGU/Agency:	LGU Representative:							
	Email Address:							
Signature	Date							
SWCD:	SWCD Representative:							
	Email Address:							
Signature	Date							
BWSR	BWSR Representative:							
	Email Address:							
Signature	Date							
For NRCS, DNR, etc. as applicable								
Agency Name and Location:	Representative:							
	Email Address:							
Signature								
F. Lacal Carramanant Unit	A							
5. Local Government Unit Approval								
By signing below, the LGU certifies that this credit deposit meets the requirements of the approved bank plan.								
WCA LGU/Agency:	LGU Representative:							
	Email Address:							
Signature								
Signature	Date							

The following *must* be on file with BWSR for the credit deposit to be completed:

- 1. Approved Wetland Bank Plan and all supporting documents
- 2. Original Recorded Bank Easement
- 3. Copy of Title Insurance which names the State of Minnesota as the insured

Send complete forms and fee payments to:

Wetland Bank Administration
Minnesota Board of Water and Soil Resources
520 Lafayette Road North
Saint Paul, MN 55155