**TODD COUNTY**

**DRAINAGE SYSTEM REPAIR REQUEST FORM**

**Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**APPLICANT INFORMATION**

 Name of Applicant

 Status: ⁪Landowner Renter ⁪Other

 Landowner Name (If not same as applicant)

 Applicant/Landowner Address

 City/State/Zip

 Applicant Phone #

 Landowner Address (if not same as applicant)

 City/State/Zip

 Landowner Phone #

**PROJECT LOCATION**

 Ditch System # Location

 Section Township Name & # Range

**DESCRIPTION OF REQUEST**

Ditch Maintenance  Maintenance – Length in lineal feet

  Beaver Dam(s) – Quantity

  Beaver Removal

  Outlet

  Washout of Side Inlet – Size (RCP or CMP)

Tile Repair  Blowout: Tile Size ( Concrete or  Plastic)

  Replacement – Length in lineal feet

  Tile Outlet – Size

  Intake – Size

  Inspection

**SIGNATURES**

By signing below I understand that I am initiating the above request for drainage system repairs.

 Signature of Applicant Signature of Landowner(s)

Received by County Ditch Inspector

**FOR OFFICE USE**

**WCA REVIEW** Agency Approval (NRCS/Swampbuster)

 Wetland Present  YES  NO Permit Issued  YES  NO

 Joint Notification Needed  YES  NO Date Permit Issued / /

**FOLLOW-UP AND INSPECTION**

Date of Project Inspection / / Work Completed  YES  NO

Inspection Comments/Corrective Action Needed

Additional Inspection Needed  YES  NO Date of Final Inspection / /

 Updated 1/27/2012