

Walsh County Water Resource District

Drain Cleanout Permit Application



Submit to wcwrb@nd.gov or mail to WCWRD 600 Cooper Ave, Grafton, ND 58237

Name:	Phone:	
Address:	City:	State:
Phone:	Email:	
Landowner Name:		
Date Application Completed:		

Site of Work to Be Completed

Township Name:

Sections/quarters:

Drain Name:

(If drain name not known, we will look it up)

Scope of Work to be Completed

Drain Cleanout due to: (check all that apply)

Sediment ___

Blow Dirt ___

Snow ___

Other ___

IMPORTANT: INCLUDE A MAP OR SKETCH ON NEXT PAGE

MAP/DRAWING OF LOCATION OF WORK:

I understand that any additional work necessary beyond what I have proposed here requires contacting the WRD Office at 701-352-0081 for further board approval.

Applicant Signature:

Date:

Approval by: _____
Walsh Co. WRD

Date