LAKE MANAGEMENT PLAN COMMENT FORM

NAME: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE: _____

E-MAIL: _____

LAKE RESIDENT?: Yes ☐ No ☐

LAKE NAME: _____

COMMENTS:

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PLEASE RETURN YOUR COMMENTS TO THE DNR DULUTH FISHERIES OFFICE BY JULY 31, 2008.

Duluth Area Fisheries
5351 North Shore Drive
Duluth, MN 55804
PHONE 218/525-0853 X200 FAX 218/525-0855