**FISHING PIER AND SHORE FISHING AREA PROGRAM APPLICATION**

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Minnesota Department of Natural Resources logo

**MN DNR, Division of Parks and Trails**

***Type all responses within the boxes associated with each question.***

***Handwritten applications will not be accepted.***

***DO NOT change the format of this document.***

***Double click on boxes and select “checked” to check***

**GENERAL CONTACT INFORMATION:**

|  |  |
| --- | --- |
| Unit of Government (required) |  |
| Contact Person: |  |
| Title of Contact Person |  |
| Mailing Address:  City, State Zip: |  |
|  |
|  |
|  |
| Daytime Phone: |  |
| E-mail Address: |  |
| Website (if available): |  |

**PARTNER (If applicable):**

|  |  |
| --- | --- |
| Contact Person and Title: |  |
| Organization/Club Name: |  |
| Mailing Address |  |
|  |
| Email address |  |
| Phone Number |  |
| Website (if available): |  |

**GENERAL FISHING PIER OR SHORE FISHING PROJECT INFORMATION:**

|  |  |  |
| --- | --- | --- |
| 1. | Category: | New  Replacement |
| 1a. | If replacement, give year of original pier / facility |  |
| 2. | Type requested | Floating Fishing Pier (Made by MINNCOR Industries) |
|  |
| Shore Fishing Area |
| Platform  Rock/Concrete  Other Custom Design |

**LAKE/SITE INFORMATION:** [**Lake Finder, DNR Website**](http://www.dnr.state.mn.us/lakefind/index.html)

|  |  |  |
| --- | --- | --- |
| 3. | County |  |
| 4. | Lake or River Name |  |
| 5. | Lake ID Number (DOWID) |  | |
| 6. | Lake Area (acres) |  | |
| 7. | Fetch Distance at Pier Site (miles) |  | |
| 8. | Maximum Depth of Lake (feet) |  | |
| 9. | Location: (Twp, Range, Section) |  | |
| 10. | Owner of Site: |  | |
| 11. | Cross Streets: |  | |
| 12.. | Will pier be part of a park | Yes  No | |
| 12a. | Estimated Annual Park Visitation |  | |
| 13. | Will pier be in city limits | Yes  No | |
| 13a. | Population of City |  | |
| 14. | List other public  Fishing Areas on the lake |  | |
|  | |
|  | |

**ANGLING INFORMATION:**

|  |  |  |
| --- | --- | --- |
| 15. | Status of fishery |  |
|  | * Sunfish/Pumpkinseed | Present Stocked |
|  | * Bluegill | Present Stocked |
|  | * Black Crappie | Present Stocked |
|  | * Small/Large Mouth Bass | Present Stocked |
|  | * Walleye | Present Stocked |
|  | * Northern Pike | Present Stocked |
|  | * Muskellunge | Present Stocked |
| 16. | Winterkill Frequency | Never  Aerated  Occasional  Often |
| 17. | Current angling use at site | Heavy  Moderate  Light  Unknown |
| 18. | Potential angling use at site | Heavy  Moderate  Light  Unknown |
| 19. | Fish Consumption Advisory | Yes  No |

**ADA REQUIREMENT AND COSTS ASSOCIATED WITH THE PROJECT:**

|  |  |  |
| --- | --- | --- |
| 20. | Shoreline Type: | Sand  Natural Vegetation  Rocky |
|  | (Check all that apply) | Mowed/Landscaped  Wetland  Wooded |
|  |  | Steep Slope  Moderate Slope  Fairly Level | |
|  |  | Ice Ridge  Ice Damage Potential | |
| 21. | Shore land Restoration needed | Yes  No | |
| 22. | Proposed site can meet ADA requirements | Yes  No | |
| 23. | Proposed ADA Trail Type | Concrete  Asphalt  Other | |
| 24. | Distance to ADA parking area |  | |

**UNIT OF GOVERNMENT INFORMATION:**

|  |  |  |
| --- | --- | --- |
| 25. | Full Time Maintenance Staff | Number: |
| 26. | Willing to take on pier maintenance for 20+ years | Yes  No  Unknown |
| 27. | Monetary Match Available | Yes  No  Unknown |
| 27a. | Potential Amount | $ |

**REQUIRED AND OPTIONAL ATTACHMENTS:**

|  |  |
| --- | --- |
| Required | Project Location Map |
| Required | Site Level Map |
| Optional | Picture(s) of Site |
| Optional | Design plan(s) |
| Optional | Letter(s) of Support |
| Optional | Miscellaneous Information |

“I hereby certify that all of the information provided in this application is true and accurate to the best of my knowledge. I recognize that in the event of the proposed project being funded, this document will be used as an addendum to the agreement between the sponsoring unit of government and the state.”

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name:** | |  | | |
| **Title:** | | |  | |
| **Unit of Government:** | | | |  |
| **Date:** |  | | | |

**APPLICATION DUE DATE:** Applications will be accepted on a continuous basis and will be used to request future program funding. There is no funding for 2016.

**Email the completed application with attachments to:**

**Nancy Stewart**

**Fishing Pier Program Coordinator**

**Nancy.stewart@state.mn.us**

**651-259-5616**