



Figure 4: Existing Site Conditions and Design Features



I HEREBY CERTIFY THAT THIS PLAN, SPECIFICATION OR REPORT WAS PREPARED BY ME OR UNDER MY DIRECT SUPERVISION, AND THAT I AM A DULY LICENSED PROFESSIONAL ENGINEER UNDER THE LAWS OF THE STATE OF MINNESOTA

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Lic. Number: 44296 Date: 1.28.2015

Operations Services Division
Safety
Facilities
Materials
Equipment
Field Operations
Information Management

DNR Division of Eco/Waters
Relocation of Whitewater River
Whitewater State Park

Winona County
Section: 20
Township: 107 N
Range: 10 W
Near Elba

Revisions
Date _____ By _____

Existing Site Conditions
Survey: XX XXXX Designed: KZ 3/14
Drawn: XX XXXX Drawn: CR 3/14
Checked: XX XXXX Checked: SK 3/14
Horz datum: NAD 83 (96 ADJ) Vert datum: NAVD 88

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