COON LAKE IMPROVEMENT DISTRICT - (CLID)

REQUEST TO BE EXCLUDED FROM HERBICIDE TREATMENTS FOR AQUATIC INVASIVE SPECIES (AIS) CONTROL

SIGNING THIS FORM DOES NOT EXEMPT YOUR PROPERTY FROM THE ANNUAL CLID FEE CHARGED TO ALL PROPERTIES WITHIN THE DISTRICT

Use this form each year to Opt Out of having herbicide treatments to control AIS within the 150' lake-ward zone from your shoreline:

Due to the distribution date of aforementioned information and when the treatments would occur, this signed form is only valid when signed between January 1st and May 31st and is valid only for that years Spring/Summer season. If you plan to submit this form and wish not to have treatment for CLP, do it immediately as early season treatment for CLP is temperature sensitive and could be applied as early as mid April. EWM treatments may occur as early as mid May. Your request to "Opt Out" is invalid for treatments that occur prior to receipt of your signature by the CLID or the DNR.

Keegan Lund / Invasive Species Specialist

Submit a copy of the following to each of the addresses listed below:

Coon Lake Improvement District

PO Box 26	Division of Ecological and Water Resources/ MN DNR	
East Bethel, MN 55011	1200 Warner Rd, St. Paul, MN 55106	
request that no herbicide treatment of	sent on or before April 1st of this current year and reviewed this document. I occur adjacent to the property and 150' lake-ward of the shoreline for the prope on or clarification, call Mike Bury @ 612-618-1372)	rty
Signed	Date	
(Only One Signature is required)		
All requested information mus	t be entered for verification and validation purposes.	
Current Year: Pin Num	aber(s):	
Property Owners Name(s):		
Lake Property Address:		
City / State / Zip		
Phone Number(s) Home:	Cell:	
Mailing Address (If different from I	Lake Property Address):	