

Natural Resource Information Report Application

McHenry County Soil and Water Conservation District

1648 S. Eastwood Drive, Woodstock, IL 60098 Voice: (815) 338-0099 Fax: (815) 338-7731

For office use only

File Number: _____ - _____ - _____ Date Received: _____ 20_____
Fee: _____ (Please make check payable to McHenry County SWCD.)

The McHenry County SWCD has thirty (30) days to complete this report after receipt of **ALL** the following items and after presentation to SWCD Board of Directors at their regularly scheduled meeting: Board meetings are scheduled for the first Tuesday of each month at the SWCD office.

Application Check List

Plat of Survey: _____ Petition: _____ Fee: _____
Tentative plat: _____ Intensive Soil Survey: _____ Tile Investigation: _____
Certified Wetland Determination/Delineation: _____

Processing of the NRI report will not begin until all of the required items have been received by the MCSWCD (office unless otherwise indicated by SWCD Staff)

Fee: Full report: \$375.00 for 1-3 acres and \$20.00 for each additional acre or part thereof.

Letter: \$75.00 SWCD will determine when letter or full report format will be necessary.

Petitioner's Name: _____ Phone: (____) _____ - _____

Address: _____

Contact Person: _____ Phone: (____) _____ - _____

Address: _____

Parcel Index Number(s): (1) _____ - _____ - _____ - _____ (2) _____ - _____ - _____ - _____

(3) _____ - _____ - _____ - _____

Aggregate parcel size _____ (acres)

Current Zoning: _____ Requested Zoning: _____

Unit of Government Responsible: _____ County of McHenry _____ City/Town of _____

Is the parcel within 1 mile of a Village or City Boundary? Yes / No (circle one)

If yes, which (City/Town/Village)? _____

It is understood that filing this application allows a district representative the right to conduct an onsite investigation of the parcel(s) described above. Furthermore, this report becomes subject to the Freedom of Information Act after presentation to the District Board of directors at their regularly scheduled meeting.

Contact person or Petitioner's signature: _____ Date: _____ / _____ /20____

The McHenry County SWCD is an equal opportunity provider and employer.