



LAKE DREDGING PROGRAM APPLICATION FORM

Project Name: _____

Project Location: _____
(attach location map)

Sponsor Organization: _____

Sponsor Address: _____

City/State/Zip: _____

Contact Person: _____

Title: _____

Daytime Phone: _____ Home Business Mobile

E-mail Address: _____

Description of the project (attach additional sheets as needed):

Original Capacity of Lake/Basin _____ Ac-ft

Proposed Excavation Amount _____ Ac-ft

Total Estimated Cost: \$ _____ Cost Share Request: \$ _____

Signature

Date: _____

Title