

NEBRASKA EROSION AND SEDIMENT CONTROL ACT COMPLAINT FORM

Instructions

For District Use Only

Complete items 1 through 5 by printing in ink or typing the appropriate information.
 Photographs depicting location, nature, and extent of sediment damage or erosion and aerial photographs may also be submitted with this form.

Filed in the office of the

 Natural Resources District
 at _____ a.m./p.m. on
 _____, 19____.
 COMPLAINT NO. _____

1. Name and address of the person filing this complaint.

Name: _____
 Address: _____
 City: _____ State: _____ Zip Code: _____
 Telephone Number: () _____

2. Authority to file complaint. (Check one)

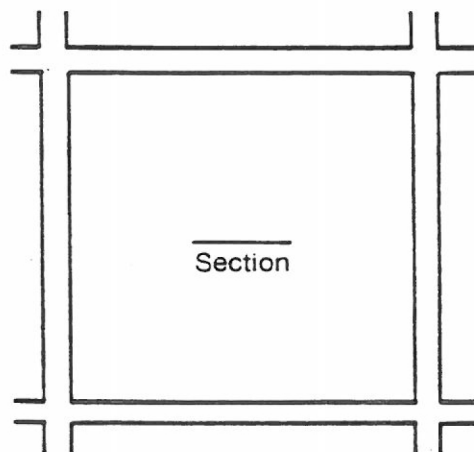
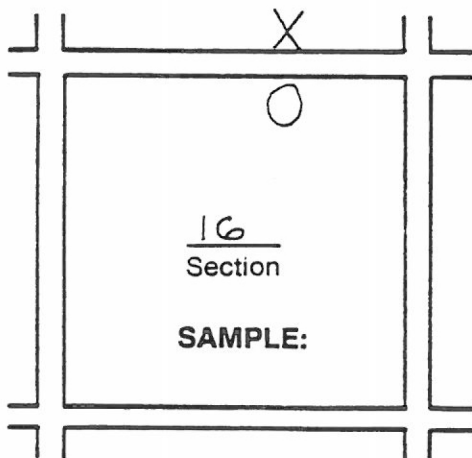
- Owner or operator of land being damaged by sediment.
- Authorized representative of a state agency or political subdivision whose roads or other public facilities are being damaged by sediment. (_____)
identify
- Authorized representative of a state agency or political subdivision with responsibility for water quality maintenance. (_____)
identify
- Authorized staff member or other agency of the natural resources district.

3. Sediment damage.

A. Location of the land or facility being damaged by excessive erosion (X) and the land believed to be the source of the sediment damage (O).

COUNTY CLUSTER
 Twp T.23.N Rge R.1.E

COUNTY' _____
 Twp _____ Rge _____



B. Identify stream or lake whose quality is being impaired including location of upper and lower points of alleged impairment.

C. Description of the nature and extent of the sediment damage or water quality impairment. Include description of physical effects and any economic losses which have occurred.

4. Date(s) the sediment damage or water quality impairment occurred or was observed.

5. I certify that the information contained in this complaint is, to the best of my knowledge and belief, true and accurate.

Date: _____ Signature: _____

Return to: _____ Natural Resources District

(Address)