

# Minnesota Wetland Conservation Act

# Technical Evaluation Panel Form

**This form can be used to document TEP findings and recommendations related to WCA decisions, determinations, enforcement and pre-application reviews.**

|  |
| --- |
| **Local Government Unit:**   **County:**   |
| **Landowner/Applicant:**   **Agent/Representative(s):**   |
| **Project Name:**   **Project No. (if any):**   |
| **Project Location:**   |

**Purpose of TEP Findings/Recommendation -** check all that apply and describe

|  |
| --- |
| [ ]  Pre-application review [ ]  Application Review (related to WCA Decision) [ ]  Local Government Road Wetland Replacement Program Eligibility [ ]  WCA Determination Request [ ]  Other (specify): Describe:  |

**Meeting Type –** check all that apply and specify dates as applicable

|  |
| --- |
| [ ]  In-Person Meeting(s), Date(s): [ ]  Electronic Exchanges (email, skype, etc.) [ ]  Onsite Review(s), Date(s): [ ]  Other (specify):  |

**Findings and Recommendations**

|  |
| --- |
|   |

|  |
| --- |
| [ ]  Attachment(s) (specify):  |

**DNR Protected Waters and Shoreland Protection Zone**

|  |
| --- |
| Will the project/activity affect DNR public waters, DNR public waters wetlands or wetlands within the shoreland protection zone? [ ]  Yes [ ]  No If yes, DNR representative is a member of the TEP. |

**Signatures**

|  |
| --- |
| [ ]  LGU TEP Member:  Agree with Findings & Recommendations: [ ]  Yes [ ]  No Signature: Date:   |
| [ ]  SWCD TEP Member:  Agree with Findings & Recommendations: [ ]  Yes [ ]  No Signature:  Date:   |
| [ ]  BWSR TEP Member: Agree with Findings & Recommendations: [ ]  Yes [ ]  No Signature: Date:   |
| [ ]  DNR TEP Member: Agree with Findings & Recommendations: [ ]  Yes [ ]  No Signature:  Date:   |