



PERMIT TO DESTROY AQUATIC VEGETATION

Permit No.: 09F-4129
Device No.:

The Commissioner of the Natural Resources, pursuant to authority by law, hereby grants this permit to the person whose name appears below, for the purpose specified, dates inclusive as shown, in the conditions hereinafter set forth:

Permittee's Name: GREG ROVERUD, GLPOA, 7847 N SHORE DRIVE, SPICER MN 56288
Fire Number: Lake Address (if different): PO BOX 362, SPICER, MN 56288
Telephone Number: 320-796-6335

INCLUSIVE DATES OF PERMIT:

FROM: June 12, 2009 TO: September 01, 2009 TYPE OF PERMIT: 1 Season

THIS PERMIT APPLIES ONLY TO THE WATER AREA AS DESCRIBED AS FOLLOWS:

Name of Lake: Green, Acres: 34007900, County: Kandiyohi
Extending ... feet along shore and lakeward a maximum distance of ... feet and 3.835 acres.
Treatment by permittee or: LR - Lake Restoration
Location of Treatment Area: Treatment for off-shore Eurasian watermilfoil on up to 3.9 surface acres.

Type of Control: Chemical control of submerged vegetation (Eurasian watermilfoil). And/or hand removal of Eurasian watermilfoil.
Means and Methods Allowed: -Up to one treatment with either 2,4-D or tricopyr, to be applied according to label instructions for control of Eurasian watermilfoil.

THE PERMITTEE OR AGENT SHALL GIVE NOTICE OF COMMERCIAL MECHANICAL CONTROL OR CHEMICAL TREATMENT DATE TO THE FOLLOWING PERSON WHICH SHALL BE RECEIVED BEFORE BEGINNING ANY WORK HEREUNDER. FAILURE TO NOTIFY PRIOR TO BEGINNING WORK OR VIOLATION OF OTHER TERMS AND CONDITIONS OF THIS PERMIT SHALL BE GROUNDS FOR REVOCATION OF THIS PERMIT OR REFUSAL TO RENEW.

Craig Soupir, Fisheries Habitat Specialist, 175 County Road 26, Windom, MN 56101 (507) 831-2900 ext 234

The Minnesota Department of Natural Resources does not vouch for the effectiveness of any control method or operation nor does it stand as arbiter whether or not any such method or operation has been satisfactory. This permit is permissive only and no liability shall be incurred by the State or by any of its offices, agents, or employees by reason of the issuance of it or by reasons of acts or operations of the permittee.

AFS: 430 SPICER
CO: 432
Other:

Authorized Signature for Commissioner: [Signature] Date: 6/12/2009