

Environmental Review Cover Page

System name: _____

System owner: _____

Project name(s) covered by this environmental review: (e.g., well #3, 300,000 gallon water tower, 4th Street watermain)

Person completing and submitting environmental review:

Name _____ Title _____

Address _____

Telephone _____ Email _____

The water system owner (community, district, board, corporation, etc.) seeking the revolving fund loan is responsible for the environmental review.

I verify this is the review for the project(s) listed above.

Signature _____ Title _____
(Official)

Name (print) _____ Date submitted _____

Submit complete environmental review record to Minnesota Department of Health district engineer.

Resource

[Environmental Review Instructions](http://www.health.state.mn.us/divs/eh/water/dwrf/er/erinstructions.html)

(<http://www.health.state.mn.us/divs/eh/water/dwrf/er/erinstructions.html>)

[Drinking Water Protection Contacts](http://www.health.state.mn.us/divs/eh/water/org/index.cfm)

(<http://www.health.state.mn.us/divs/eh/water/org/index.cfm>)

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To obtain this information in a different format, call: 651-201-4700. Printed on recycled paper.