



SIBLEY COUNTY DRAINAGE DITCH REPAIR REQUEST

Date _____

_____ Ditch Number _____ Section _____ Township _____

Give a brief location and nature of disrepair:

I the benefited landowner represent and state:

1. That I am the owner of lands within and affected by the above described watershed.
2. That said ditch is in need of the above described repairs.
3. I do hereby consent to having the requested repairs done at any time convenient to the Sibley County Ditch Inspector and their contractors.

I ask that the said Sibley County Ditch Inspector will investigate this mater and take such measures as they deem necessary to repair said ditch.

Name _____ Address _____

Phone Number _____ E-mail _____

Requested Inspection Date/Time _____

Other Issues? YES NO

Inspection Notes: _____ (Internal County Use)

Estimate Cost of Repair _____ Funds Available? YES NO

Approved for repairs by Sibley County Ditch Inspector: _____ Date: _____

Approved by County Board? YES NO N/A Board Approval Date: _____

Repair Completed: _____