Insert Lake Organization Name

**DELETE THIS TEXT BOX BEFORE SUBMITTING MEMO!!**

Notes for writer:

1. Replace/delete gray highlighted text.
2. Memo is only needed for AIS Population Management or Management Plan Implementation grant categories.
3. Memo request must be submitted on or prior to September 15.
4. APM plans have a completion date no more than 5 years prior to memo submittal and other plans no more than 10 years.

Memo

|  |  |
| --- | --- |
| To: | Insert Name of Regional AIS/Lake/River Biologist |
| From: | Insert Your Name (Insert Your Title or Role) |
| cc: | Insert Another Name or N/A |
| Date: | Insert Date |
| Re: | Determination of Eligibility Request for Insert Name of Surface Water Grant Project Name (Choose an item.) |

The current management plan for Insert Lake/River/Watershed Name is the Insert Plan Name (Plan) dated Insert Month Date, Year. A complete copy of the management plan is attached or can be downloaded here: Insert Link to the Electronic Location of Plan.

Per NR 193.53, Wisconsin Administrative Code, Insert Organization Name is requesting a Determination of Eligibility for the following activities to apply for a an Choose an item. grant.

1. Insert Activity Name (Insert exact location of where to find activity in Plan – Item number, page number, Table/Figure) – Insert concise description of activity. Insert specific sections and page numbers in the Plan that include data and any information used to select the activity/recommendation that you would like DNR staff to review to make the eligibility determination.

The public was provided the opportunity to review and comment on the Plan by insert description of process used (e.g., posting on website, advertisement of comment period, dates of posting, etc.). Insert summary of comments received, or state that no public comments were received.

We look forward to your response!

Thank you,

Insert Your Name (Insert Your Title or Role)

Attachment: Insert Name of Management Plan (Insert Date of Management Plan)