



Application Number: \_\_\_\_\_

## Commercial/Community/Non-navigational Encroachment Permit Application

This application and required documents must be completed when submitting an encroachment permit application. Incomplete applications will be returned without processing.

**ENCROACHMENT TYPE(S):**  
(Check all that apply)

- |  |                                       |
|--|---------------------------------------|
| <input type="checkbox"/> Community dock                | <input type="checkbox"/> Float home   |
| <input type="checkbox"/> Commercial marina             | <input type="checkbox"/> Boat garage  |
| <input type="checkbox"/> Bank stabilization or Rip Rap | <input type="checkbox"/> Mooring buoy |
| <input type="checkbox"/> Other – describe: _____       |                                       |

**Applicant's Littoral Rights Are:**

- ☐ Owned, fee simple title holder
- ☐ Leased
- ☐ Signature of littoral rights owner is obtained if Applicant is not the owner of the riparian/littoral rights
- ☐ Other – describe: \_\_\_\_\_

**Provide a Copy of Each Required Document on 8½"x14" or Smaller Paper:**

- ☐ County plat map showing both neighboring littoral lots.
- ☐ Tax record identifying the owner of the upland parcel(s).
- ☐ Lakebed profile with encroachment and water levels of winter and summer.
- ☐ General vicinity map that allows Department to find the encroachment.
- ☐ Scaled air photo or map showing lengths of nearby encroachments, distances to adjacent encroachments, and location and orientation of the proposed encroachment.

**Are Existing Docks or Other Encroachment(s) Permitted On This Parcel(s)?**

- ☐ No
- ☐ Yes. Please attach a current photograph and a "to scale" drawing (see Document Requirements Above)

Permit # \_\_\_\_\_ Date of Construction: \_\_\_\_\_

What will happen to the existing dock or encroachment if this permit application is approved?

- ☐ Remain unchanged
- ☐ Complete removal
- ☐ Modification
- ☐ Other: \_\_\_\_\_

*(Please note that old dock materials must be removed from the lake. Discarding these materials creates serious boating safety issues and offenders will be subject to prosecution and penalties.)*

**How Many Feet Does the Proposed Encroachment(s) Extend Beyond the Ordinary (or Artificial) High Water Mark?**

Encroachment Type: \_\_\_\_\_ feet

Encroachment Type: \_\_\_\_\_ feet

Encroachment Type: \_\_\_\_\_ feet

**The Proposed Dock Length Is:**

- ☐ **The same or shorter** than the two adjacent docks
- ☐ **Longer** than the two adjacent docks
- ☐ **Longer** than the two adjacent docks, but within the line of navigability established by the majority of existing docks in the area.
- ☐ \_\_\_\_\_ feet and not located near any other docks or encroachments.

**How many frontage parcel lots does the applicant own?**

\_\_\_\_\_ parcels

**For Community Docks, Does the Property Have at Least 50 Feet of Littoral Frontage?**

☐ No

☐ Yes Total front footage: \_\_\_\_\_ feet

**For Community Docks, Does the Proposed Dock Exceed the Maximum Square Footage of 7 ft<sup>2</sup> per Littoral Front Foot?**

☐ No Total square footage: \_\_\_\_\_ ft<sup>2</sup>

☐ Yes \_\_\_\_\_ ft<sup>2</sup>

**Will any Proposed Docks Exceed the Maximum Width of 10 Feet?**

☐ No

☐ Yes If yes, explain why: \_\_\_\_\_

**Will the Proposed Encroachment (besides riprap) Be Located Closer Than 25 Feet to the Riparian/Littoral Right Lines Established with Your Neighbors?**

☐ No

☐ Yes If yes, what are the proposed distances?

Encroachment Type: \_\_\_\_\_ feet

Encroachment Type: \_\_\_\_\_ feet

Encroachment Type: \_\_\_\_\_ feet

☐ Consent of affected neighbor was attained

### **Determining Riparian/Littoral Right Lines**

Littoral right lines are not simple extensions of the upland property lines. Littoral right lines are generally perpendicular, or at right angles, to the shoreline. Curved shorelines or unusual circumstances may require Department Staff, or other professionals, to closely examine littoral right lines and assess the potential for infringement on adjacent littoral property owners.

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I hereby certify that I am the applicant or authorized representative of the applicant and that the information contained in this application is true and correct to the best of my knowledge and further acknowledge that falsification or misrepresentation of any information contained herein or provided herewith will be grounds for denial of the application.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Applicant Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant Title (if applicable)

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### **Second Applicant (If applicable)**

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Applicant Print Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant Title (if applicable)