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2025 Aquatic Weed Control Sign Up Sheet

Lake Name: _____

Customer Name: _____

Treatment Address: _____

Billing Address: _____

Email/Phone: _____

Chemical aquatic weed treatments occur twice per summer. Cost is \$410 for standard treatment which consists of two applications typically in June and July.

Also offering physical hand pulling of weeds by the root followed by removal from the property through scuba diving. Call for free estimate and individual pricing.

Treatment area is either 50ft of shoreline or half of owned shoreline length. Whichever is smaller per state regulation.

Total ft of shoreline owned: ()
Previous years DNR permit number: _____
(if known)

| | |
|--------------------|----------|
| Lakeweed Treatment | \$410.00 |
| Permit Fee | \$40.00 |
| | |
| | |
| Total | \$450.00 |

**Pricing is based on 15
house minimum per lake.*

Signature: _____

Please draw a rough sketch of the treatment area below or describe where you would like treated.



I hereby make application for a permit to destroy and control aquatic vegetation or aquatic nuisance as described above. I understand that the control of aquatic nuisances, including destruction of aquatic plants and algae, is subject to rules of the Commissioner of Natural Resources. I understand that an Aquatic Plant Management Specialist may wish to inspect the proposed treatment area before, during, and/or after work is completed and that by making this application, I give permission to the specialist to enter my property to make such inspection. I understand that an annual report will be required on results achieved. Completion of this form and processing of the accompanying application fee does not constitute obtaining a permit.

By signing this application, I attest that I own, lease or control the land at the address listed above. The information submitted and the statements made concerning this application are true and correct to the best of my knowledge. As always, feel free to reach out with any questions or concerns.

Signature: _____