

Army Compatible Use Buffer (ACUB) Program Land Owner Interest Form

I. Landowner Information:

1. First Name _____ Last Name _____
2. Mailing address _____
3. Phone number: Day _____ Evening _____ Cell _____
4. E-mail: _____
5. Fax: # _____

Provide other landowner(s) information including current development/residence on property and any other points of interest regarding the land. Please note if more than one landowner.

II. Land Information:

County _____	County _____	County _____
Township _____	Township _____	Township _____
Section _____	Section _____	Section _____
TWP _____	TWP _____	TWP _____
Range _____	Range _____	Range _____
Acres _____	Acres _____	Acres _____

III. Protection Method: (Please Check)

Easement _____ Acquisition _____

IV. Signature:

Land Owner Signature _____ Date: _____

By signing this form it will get you on the list for ranking. It does not lock you in to an agreement.

V. Points of Contact:

Camp Ripley
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320-616-2720

SWCD
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DNR
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DNR Com. Assistance Spec.
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