

# PLM Lake and Land Management Corp

## 2025 Aquatic Plant Management BLCA New Customer Form

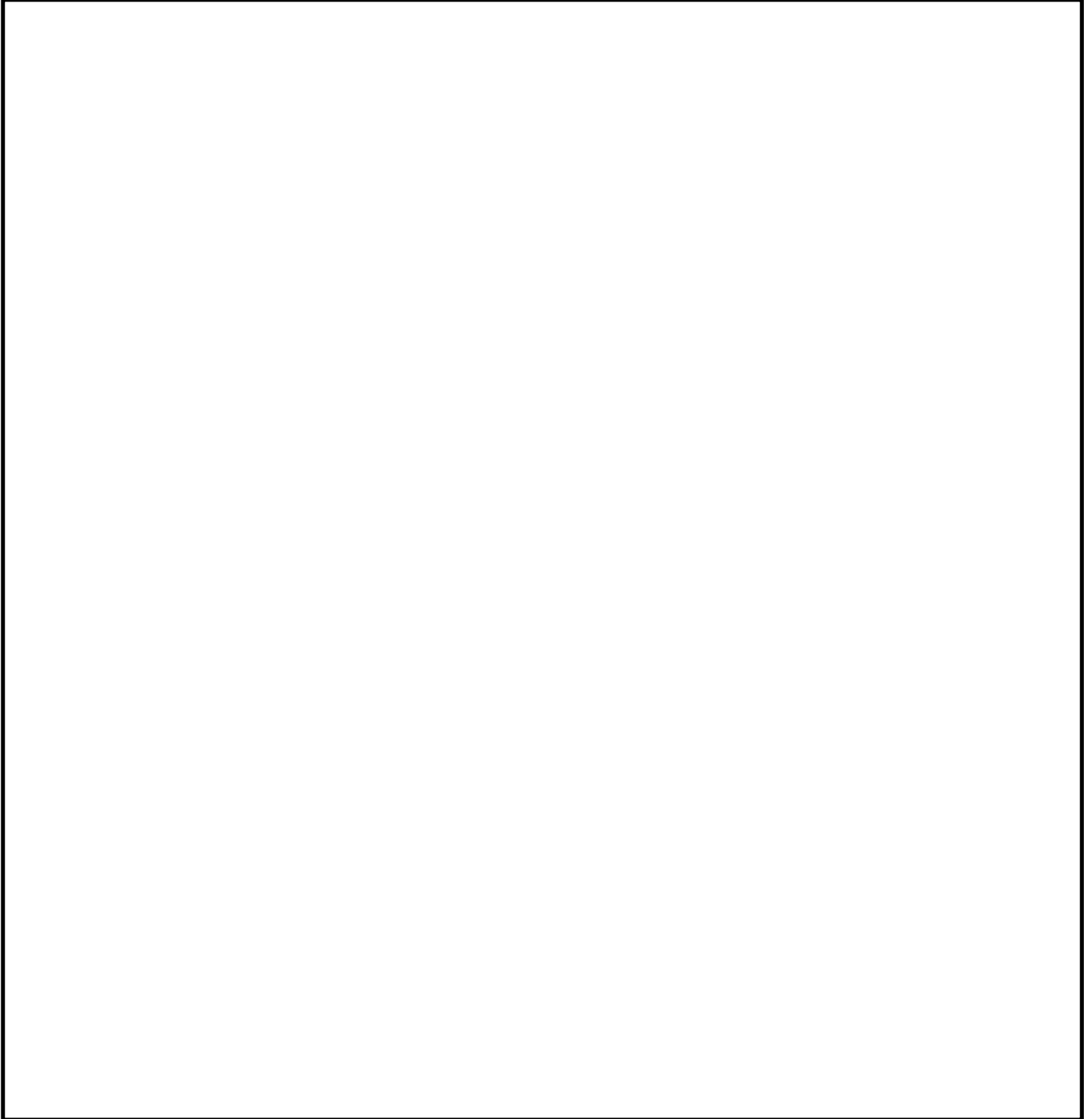
Mailing and Billing Information	
First Name	Last Name
Street Address	
City, State, Zip	
Phone	Email Address

Lake Front Property Information		
Lake Name (and bay if applicable)	County	
Lake Address Street (if different from billing)		City, State, Zip
Lake Address Phone	Frontage Owned	
Lake Home Color	Frontage to be treated (shore x lakeward distance)	
Identifying features from the lake (dock features, decor, flags, etc.)		
# of Treatments	Permit Fee <i>\$35 permit fee waived for first year</i>	Program Cost (Quote) <i>Leave Blank</i>
Treatment Type (if known)		
<input type="checkbox"/> Submersed Vegetation <input type="checkbox"/> Filamentous Algae <input type="checkbox"/> Snails(swimmers Itch) <input type="checkbox"/> Chara <input type="checkbox"/> Floating Leaf <input type="checkbox"/> Emergent		
Please fill form completely and return to PLM to receive One Year Service Agreement and Invoice. Contact us if you have any questions.		



**PLM Lake and Land Management Corp.**  
**Aquatic Plant Management New Customer Form Property Sketch**

Please include: North arrow, treatment area location, dock, and any notable landmarks



*Home-owners may also send photos of their lakefront property to [servicemw@plmcorp.net](mailto:servicemw@plmcorp.net)*

▪ **PO Box 328, Brainerd, MN 56401** ▪ **(218) 316-6050 voice** ▪ **(866) 527-6399 fax** ▪