PLM Lake and Land Management Corp
2026 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** ☑ *$35 permit fee waived for first year*	**Program Cost (Quote)** Leave Blank

Treatment Type (if known)

☐ **Submersed Vegetation** ☐ **Filamentous Algae** ☐ **Snails(swimmers Itch)**

☐ **Chara** ☐ **Floating Leaf** ☐ **Emergent**

Please fill form completely and return to PLM to receive One Year Service Agreement and Invoice. Contact us if you have any questions.

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

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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

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