Form 275 # FL

STATE OF MONTANA NATURAL STREAMBED AND LAND PRESERVATION ACT NOTICE OF EMERGENCY

(This is not a permit application)

When emergency action has been taken to safeguard life, property, or crops, the following information must be received by the conservation district within 15 days of the activity:

1.	Name of Applican	nt:					
	Address:	City/State/Zip:					
	Telephone No.: _						
2.	Location of Activ	vity					
	Stream name:			County: <i>Flathead</i>			
	Location	1/4	1/4	1/4 Section:	Township:	Range:	
3.	Date emergency action was taken						
4.	Explanation of emergency causing the need for the actions described above (attach additional sheets if necessary)						
	ii necessary)						
5.	Description of en	nergency a	ction taken:				
•	Description of the	nergeney a	ction tunch.				
6.	Signature				Date		