

**Environment and Natural Resources Trust Fund (TF)
Land Acquisition Reporting Form**

As required by M.S. 116P.16 for interest in land acquired with
Environment and Natural Resource Trust Fund proceeds after June 30, 2005.

Date of Report: 21:12 11/18/2022

ID Number: 22-035-003

Contact Information

Original Purchaser (Entity/Organization/Agency): Crow Wing County

Name of person submitting report: Jessica Shea

Address: 322 Laurel Street Suite 15
Brainerd

MN 56401

Phone: (218) 824-1123

Email: jessica.shea@crowwing.us

Legal Citation

Legal Citation of TF Appropriation: M.L. 2021, First Special Session, Chp. 6, Art. 5, Sec. 2, Subd. 09o

Acquisition Details

Original purchase date: 05/20/2022

Working title(s) of acquisition: Paul M Thiede Fire Tower Park

Type of Acquisition (Fee / Conservation Easement / Other): Fee

Location:

County:

Crow Wing

Range:

1/4 Section:

City:

Pequot Lakes

Section:

1/4 1/4 Section:

Township:

Size in acres? (Provide total acres to the nearest one-tenth acre): 40

Natural Resources conservation values in acres (e.g. wetland/upland, prairie/grassland, forested, other):

Describe Adjacency to Public/Private Conservation Lands:

Name of Adjacent Body of Water (if applicable):

Amount of Shoreline (linear feet/miles):

Funding

Purchase Price: \$ 185,000

Appraised Value: \$

Related Professional Service Costs: \$

Total Project Costs: \$

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Source of money	Amount of funds	% of total project costs	Proportional Size (acres)
Environment Natural Resources Trust Fund	185,000	100	40
Other State Money	0	0	0
Federal Money	0	0	0
Regional/Local Government money	0	0	0
Non-profit Money	0	0	0
Bargain Sale/Donation Value	0	0	0
Other Money	0	0	0
Total Funds	185,000	100	40

Funding

A. Interest is retained by original purchaser

B. Interest in the property was simultaneously transferred to another entity as part of the original purchase arrangements

C. Interest in the property was transferred to another entity on _____

Check appropriate option(s) for who owns and manages the property as of the date of this report.
Fill in contact information below.

DNR, Wildlife Management Area - Name of WMA: _____

DNR, Scientific and Natural Area - Name of SNA: _____

DNR, Aquatic Management Area - Name of AMA: _____

DNR, State Park - Name of State Park: _____

DNR, Forestry - Name of Forestry Unit: _____

DNR, Trails - Name of Trail: _____

U.S. Fish and Wildlife Service: _____

Local Unit of Government, Specify What County or City: Crow Wing County

Other, Specify Organization: _____

Other, Specify Organization: _____

Primary Contact:

Jessica Shea

Address 322 Laurel Street Suite 15
Brainerd MN 56401

Phone: (218) 824-1123

Email: jessica.shea@crowwing.us

Alternate Contact:

Address

Phone:

Email:

Notes/Comments: