



**MAPLE GROVE LAKE IMPROVEMENT PROGRAM  
APPLICATION FORM  
DUE FEBRUARY 28<sup>th</sup>, 2023**



PROJECT NAME Fish Stocking

DATE February 28, 2023

Lake Rice

Organization Rice Lake Area Association (RLAA)

Contact Person George Schneider Telephone (H) 763-453-0065

Address: 14000 92nd Place North, Maple Grove, MN 55369 (W) \_\_\_\_\_

Contractor/Applicator 10000 Lakes Aquaculture, Inc

Address 14622 County 57, Osakis, MN 56360

Telephone 320-267-1626

**Project Description**

Scope of Work (including description of lake area, size of area and expected longevity of project enhancements)

Based on 2022 Fish Survey conducted by Blue Water Science, we would like to help build up the Bluegill Sunfish population  
which was hit hard by the winterkill in 2021-2022. Our #1 reason for fish stocking is to provide a natural source  
for eating carp eggs (Sunfish are known for this). The other species we would like to stock have shown the ability to survive  
in Rice Lake in the past.

	Meets Objective of Management Plan?	
	<u>Yes</u>	<u>No</u>
1. Shoreline Buffer	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2. Watershed Clean-Up	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3. Aquatic Plant Control	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4. Water Quality	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5. Public Education	<input type="checkbox"/>	<input checked="" type="checkbox"/>
6. Fisheries	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7. Recreational	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8. Algae Control	<input type="checkbox"/>	<input checked="" type="checkbox"/>
9. Other <u>Reduce the carp population</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>

For Copper Sulfate treatments, secchi disc readings for water quality, must be taken for one week prior to and after treatment.

	<u>Readings Before</u>	<u>Readings After</u>
Date_____	_____	Date _____
Date_____	_____	Date _____

**Project Cost**

Project Cost \$ 3,138.50  
(Attach copy of invoices and permits)

Association Funding \$ 1,569.25

Other Funding \$ \_\_\_\_\_

Amount of City Funding Requested \$ 1,569.25

Description of Association in-kind labor and materials: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**I declare the stated costs are an accurate reflection of estimated costs to be incurred.**

George L. Schneider  
**Organization Representative**

February 28, 2023  
**Date**