This form supplied by the Minnesota Department of Agriculture for use by the

County of _____ Phone _____

County Noxious Weed Inspection Report

Entry and inspection by authority of Minn.Stat. 18.79, subd. 2, 3, and 5 and 18.81, subd.1a.

☐ Routine Inspection:	☐ Complaint:	☐ Violation Follow-up:
☐ Other:		☐ Date:

Description of Noxious Weed Infested Land

Township/City:		
Section/Block:	Subdivision:	Range/Log:

Landowner's Name:			
Address:	City:	State:	Zip:
Occupant's Name:			
Address:	City:	State:	Zip:

Noxious Weed Observed on the Above Described Land

Plants Listed as Prohibited-Eradicate	Plants Listed as Prohibited-Control
1.	1.
2.	2.
3.	3.
4.	4.

Action Taken (Please Check Only If Statement Is True)

☐	1. Noxious weeds are actively growing on the land described and control or eradication measures are not apparent.	☐	7. The material or equipment described below may be transported on a public road without a permit.
☐	2. Noxious weed problem noted in this inspection was referred to county or local inspector for further action.	☐	8. The material or equipment described below is unlawful to transport on a public roads without a permit.
☐	3. Informal notice made for voluntary compliance *(personal contact, letter, postcard, or telephone call).*	☐	9. Noxious weeds have been controlled or eradicated as required by an individual notice.
☐	4. Noxious weeds have viable propagating parts and are capable of spreading to property of adjacent landowners	☐	10. Noxious weeds have not been controlled or eradicated as required by an individual notice
☐	5. An individual notice served to enforce control or eradication of noxious weeds.	☐	11. Other
☐	6. Sample of viable noxious weed propagating parts obtained as evidence *(describe sampling procedure in remarks section).*		

Remarks

Inspector's Name _____ Inspector's Signature _____ Phone # _____

Inspector's Name _____ Inspector's Signature _____ Phone # _____

Landowner's Signature: _____ Occupant's Signature: _____

In accordance with the Americans with Disabilities Act, this information is available in alternative forms of communication upon request by calling 651-201-6000. TTY users can call the Minnesota Relay Service at 711. The MDA is an equal opportunity employer and provider.