

Woodland Stewardship Plan: PID#05-002-0700 and 05-002-0900

City/County: Isle, Mille Lacs

Geographic Management Zone: Mille Lacs Lake

Landowners: David and Heidi Lockwood

Acres: 80



Project Summary:

This project will provide cost-share for a Woodland Stewardship Plan for David and Heidi Lockwood in Isle, Mille Lacs County. This falls within the Mille Lacs Lake GMZ according to the Rum River Comprehensive Plan. This is a heavily forested area, contributing to the high water quality levels, and so keeping it forested is a good priority that meets goals of both the RRW Comp Plan and the LCCMR grant.

Project Status:

Initiated: 2/1/2026

Contract approved:

2/11/2026

Completed:

3/26/2026

Funding:

Watershed and Forest Restoration: What a Match!

\$300 cost-share

Cooperators:

LCCMR (funding source)

BWSR (grant holder)

Private Consultant:

Paul Dickson

Watershed:

Rum River Watershed



Woodland Stewardship Plan (WSP) Cost-Share Contract

PURPOSE: To create a contract between the Mille Lacs Soil and Water Conservation District (SWCD) and the landowner(s) for Woodland Stewardship Plan (WSP) cost-share assistance.

General Information (to be filled in by the MLSWCD):

Organization Mille Lacs SWCD	Contract Number P23-2942-WSP-21	Amendment <input type="checkbox"/> Date(s):	Canceled <input type="checkbox"/> Date:
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*If contract amended, attach amendment form(s) to this contract.

Landowner Information:

Name: <i>David Lockwood</i>	Phone: <i>218-851-7457</i>	Email: <i>HLL@brainerd.net</i>
Mailing Address: <i>16349 Eagle Bluff Dr</i>	City/State: <i>Brainerd</i>	Zip: <i>56401</i>
WSP Parcel Number(s): <i>05-002-0700 and 05-002-0900</i> WSP County: <i>Mille Lacs</i>		

Approval and Reimbursement Process

1. A signed contract must be received from the landowner before any work begins.
2. Mille Lacs SWCD staff will submit the signed contract to the Mille Lacs SWCD Board for review.
3. If approved, the contract will be signed by Mille Lacs SWCD, and plan writing may commence.
4. Upon completion of the Woodland Stewardship Plan, the landowner or consultant must submit:
 - a. A copy of the final plan; and
 - b. A copy of the paid invoice to Mille Lacs SWCD.
5. Mille Lacs SWCD staff will bring the reimbursement request to the Board for final confirmation.
6. Upon Board confirmation, reimbursement will be issued to the eligible party.

Contract Information

I, the undersigned, do hereby request financial reimbursement to assist with the creation of a Woodland Stewardship Plan (WSP). It is understood that:

1. The Woodland Stewardship Plan (WSP) must cover land located within the Rum River Watershed.
2. The plan writer selected by the landowner must:
 - a. Be a certified plan writer with the Minnesota Department of Natural Resources (DNR); and
 - b. Hold current professional registration.
3. In addition to standard WSP content, plans shall emphasize:
 - a. Land protection opportunities, such as enrollment in the Sustainable Forest Incentives Act (SFIA) and Reinvest in Minnesota (RIM) Easements; and
 - b. Reforestation and tree planting potential and opportunities.
4. The landowner or consultant must provide:
 - a. A final copy of the Woodland Stewardship Plan; and
 - b. A copy of the paid invoice for plan development.
5. Cost-share shall be provided as a flat-rate reimbursement of \$300, not to exceed the actual cost of the Woodland Stewardship Plan.
6. This contract is not in effect until the date of the final authorized signature. Any costs incurred prior to the contract's effective date will not be reimbursed.
7. It is the responsibility of the landowner to convey all necessary and accurate information to their selected plan writer.
8. This contract shall expire upon completion of reimbursement by the SWCD.




Woodland Stewardship Plan (WSP) Cost-Share Contract

Landowner Signature

The landowner's signature indicates agreement to;


1. The contract information as outlined above, and;
2. The organization's representative conferring with the plan writer on plan's details, as necessary.

Date	Landowner
2-1-28	

SWCD Board Signature:

The organization has authorized financial assistance in an amount not to exceed \$300 for one Woodland Stewardship Plan and not to exceed the actual cost of the plan.

I certify that I have reviewed this contract and all supporting documentation and that, to the best of my knowledge and belief, the information provided is accurate and in compliance with the terms of this contract.

Approval Date	Authorized Signature	Total Amount Approved:
2/11/26		\$ 300

Woodland Stewardship Plan Summary

Landowner Goals:

- Maintain young forest conditions to support wildlife habitat and ensure a future timber supply.
- Promote habitat diversity by encouraging understory tree growth, thinning stump sprouts, and releasing conifers and oaks.
- Conduct timber harvests and/or thinning to improve forest health, generate income, and promote regeneration.
- Provide a diverse landscape that includes both forested areas and open grassy areas for wildlife.
- Protect and maintain wetlands to support water quality and wildlife habitat.

General Property Description

Location and Access:

The property is located approximately 6.5 miles northeast of Isle. Access is limited, with an easement running through a spruce swamp to the southeast corner of the property from County Road 132 (470th Street). Interior access is good, supported by an established trail system. The landowner does not reside on the property, and there are no permanent structures present.

Surrounding Area:

The surrounding landscape is primarily forestland interspersed with wetlands and lakes. Upland forests in this region are predominantly hardwoods. Adjacent properties are privately owned. The primary drainage in the area is Peterson Creek.



P.O. Box 642
 Onamia, MN 56359
 320-532-5038 office
 p.dickson@frontiernet.net
 Web Site: www.Dicksonforestry.com

INVOICE

DATE: March 16, 2026
INVOICE # 415
FOR: Stewardship plan

Bill To:

Daniel Lockwood
 16349 Eagle Bluff Drive
 Brainerd, MN 5601

Paid 3-23-26

DESCRIPTION	Acres	\$/acre	AMOUNT
Stewardship plan for \$8 acre	80	\$ 8.00	\$ 640.00
\$300/plan	1	\$ 300.00	\$ 300.00
			\$ -
TOTAL			\$ 940.00

Make all checks payable to: **Dickson Forestry Inc**

THANK YOU FOR YOUR BUSINESS!

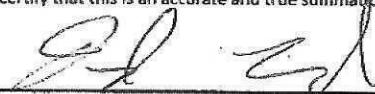
FLAT RATE - VOUCHER AND PRACTICE CERTIFICATION FORM

PAYEE AND COST INFORMATION

Name: David Lockwood
 Address: 16349 Eagle Bluff Dr
 City, State, Zip: Brainerd, MN 56401
 Contract No.: P23-2942-WSP-21 Total Amount Authorized: \$300
 (from contract)

Practice	Quantity	Unit	Unit Rate	Total
Woodland Stewardship Plan	1			\$0.00
				\$0.00
				\$0.00
				\$0.00
				\$0.00
				\$0.00
				\$0.00

PAYMENT REQUEST: \$300.00

I certify that this is an accurate and true summation of the above project, which was completed on: 3-26-26

 Payee Signature _____ Date 4-1-26

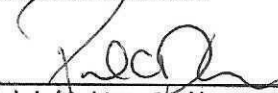
PAYMENT AND CERTIFICATION INFORMATION

- A. Type of request (partial or final): _____
- B. Payment amount requested: \$300.00
- C. Total Amount Authorized: \$300.00
- D. Total previous partial payments: _____
- E. Amount available (C - D) \$300.00

Amount Approved for This Voucher: \$300.00
 (cannot exceed Total Amount Authorized)

Technical Certification

I certify that an inspection has been performed and that the items identified under the Practice Information section of this form have been completed and are in accordance with the requested practice standards and specifications.


 Technical Assistance Provider _____
 Date 4-2-26

Administrative Certification

I certify that I have reviewed this voucher and all supporting information and that to the best of my knowledge and belief, the quantities and rates are accurate and are in accordance with terms of the contract identified.

Administrative Sign-off _____
 Date _____