

South Dakota Mediation REQUEST FOR INTERVENER - WATER DRAINAGE MEDIATION

SEND THIS FORI	M AND A \$200.00	FILING FEE TO:
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For Office Use Only Case Number

Case Number.	
Check Number:	
Date Received:	

SD DEPARTMENT OF AGRICULTURE	
DIRECTOR - AG MEDIATION PROGRAM	
523 E CAPITOL AVE, FOSS BLDG	
PIERRE, SD 57501-3182	

Date:		
*Intervening Party:		Contact:
E mail:	Primary Phone:	Secondary Phone:
Address:		City/State/Zip Code:
The intervener is a:	🗌 real property owner 🗌 real	property administrator
What is the case numbe	r you are requesting to intervene i	n?
List the parties in this ca	ase?	
Directions from nearest County:	town: Legal Description:	
Driving Directions:		
Explain how you may be	impacted by the drainage or plan	ned drainage activity (use additional pages if necessary):
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The assigned Mediator will review your request to intervene. In order to intervene in a mediation case, you must explain how you determined that those interests (property, health, or safety issue) will not be addressed by the existing parties. On a separate page, provide a detailed explanation, along with supporting documentation to accompany your request for intervener status.

By signing this form, I understand that if intervener status is granted, I become a party to this mediation and share equally with all parties the costs of this mediation case.