



33155 Hemingway Avenue
Stacy, Minnesota 55079
Phone: 651-462-3009
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Zoning Land Use Application Form

Community Comes Naturally

<input type="checkbox"/> Plat – Sketch Plan	<input type="checkbox"/> Plat – Preliminary Plat	<input type="checkbox"/> Plat – Final Plat
<input type="checkbox"/> Minor Subdivision	<input type="checkbox"/> Lot Line Adjustment	<input type="checkbox"/> Site Plan Review
<input type="checkbox"/> Comprehensive Plan Amendment	<input type="checkbox"/> Zoning Amendment	<input type="checkbox"/> Sign Permit
<input type="checkbox"/> Easement/ROW Vacation	<input type="checkbox"/> Home Occupation Permit	<input type="checkbox"/> Driveway Permit
<input type="checkbox"/> Residential Kennel License	<input type="checkbox"/> Commercial Kennel License	<input type="checkbox"/> Other (_____)

Applicant Contact Information

Please note: All official communication will be routed through this contact.

Name:			
Street Address:			
City, State, ZIP:			
Home Phone:		Work Phone:	
Email:		Fax Number:	
Name of Business (if applicable):			
Business Address (if applicable)			
Business City, State, ZIP			
Business Phone:		Business Fax:	

Subject Property Information

(Location of Application)

Address	
PIN	
Legal Description	
Zoning District	

Property Owner Information

(If different than Applicant)

Name:			
Street Address:			
City, State, ZIP:			
Home Phone:		Work Phone:	
Email:		Fax Number:	

Please provide a detailed description of your request and attached a copy of a scaled site plan

Applicant Signature		Co-Applicant Signature	
Printed Name		Printed Name	
Title		Title	
Date		Date	

I understand that the application fee is non-refundable. All costs associated with the processing of this application are the responsibility of the applicant whether this application is approved or denied. Any excess of escrow account deposits over expenditures will be refunded at the time of account closure. I also understand that as the applicant, it is my responsibility to obtain all other permits or licenses required by any applicable regulatory agencies for this Land Use Application.

Property Owner Signature		Property Owner Signature	
Printed Name		Printed Name	
Title		Title	
Date		Date	

I hereby certify that I am the fee title owner/contract for deed vendee of record for the above-mentioned property. Failure to prove ownership may void any agreements entered into the City and I will be held liable for any and all costs incurred by the City.