CITY OF PAYNESVILLE ~ ZONING ORDINANCE AMENDMENT APPLICATION

221 Washburne Ave. ~ Paynesville, MN 56362
Phone: 320-243-3714 ~ Fax: 320-243-3713

List All Property Owners:_____

Contact Person:_____ Email Address: _____

Mailing Address: _____

Telephone No.: _____ Parcel No.: _____

Property Address: _____

Legal Description: Lot: _____ Block: _____ Addition: _____

_____

DESCRIPTION OF REQUEST: (use separate sheet if needed)

TO BE COMPLETED BY APPLICANT:

Zoning District _____

Existing Use of Property _____

Proposed Use of Property _____

_____

Will This Use Require A Conditional Use Permit? _____

Will This Use Require A Variance?

_____

Permit Fee: $500.00
Non-refundable

Application Must Include:

- ❑ Legal description from abstract.
- ❑ Statement containing all the circumstances, factors, and arguments that the applicant offers in support of the proposed amendment.
- ❑ Any written or graphic data required by the City Administrator.

Date:

_____

_____

All Property Owners Must Sign This Application

For office use only:
Application Fee: $500.00 (non-refundable) Date Paid _____

For office use only: Cash _____ Check No. _____
Present To Planning Board Date:_____ Planning Set Public Hearing Date: _____
Planning Public Hearing Date: _____ Council Makes Determination Date: _____

PLANNING BOARD ACTION:
Recommended to Council Approved Denied Date: _____
CITY COUNCIL ACTION:
Approved Denied Date: _____
Date Received In Office: