

Application for a Shoreland Alteration Permit



INSTRUCTIONS

Before you apply for a Shoreland Alteration Permit, all property taxes must be current. Please complete this application in full. Incomplete or incorrect applications will be returned to the applicant. The application and required submittal documents may be submitted in person or mailed to:

Mille Lacs County Zoning Department
635 2nd Street SE
Milaca, MN 56353

APPLICANT INFORMATION

Name: _____ Contact Phone: _____

Mailing Address: _____

E-mail Address: _____

Are you purchasing the property on a Contract for Deed? (*circle one*) Y N

If yes, please have the Contract Holder sign here: _____

PROPERTY INFORMATION

Property Address: _____

Parcel ID Number: (*e.g. 00-000-0000*) from your tax statement: _____

Is the property located within 1,000 feet of a lake or 300 feet of a river? (*circle one*) Y N

APPLICATION SUBMITTAL REQUIREMENTS

- Description of the proposed alteration, including the following requirements:
 - Project type and purpose;
 - Estimated project start and completion date;
 - Area of disturbed ground;
 - Vegetation alterations;
 - Volume and type of fill or material removed; and
 - Existing and finished slope.
- Site Plan
- Plans for temporary and permanent erosion control and stormwater management
- Fee of \$75.00, payable by cash, check, or credit card

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TERMS AND CONDITIONS

The information in this application and submitted materials are true and correct to the best of my knowledge. I agree that all work will comply with all applicable federal and state regulations and the Mille Lacs County Development Ordinance. I also agree to allow Mille Lacs County staff to enter the property during normal business hours to conduct tests and inspections as may be needed to process the permit application.

Signature of Applicant/Owner

Date

OFFICE USE ONLY

Date Application Received: _____ Taxes Verified as Current: Y N
Zoning District: _____ Any Violations on Property: Y N
Environmental Overlay District: _____
Existing or Proposed Allowed or Conditional Use: _____
Ownership Verified: Y N
Date Staff Approved Application as Complete: _____

- Setbacks
- Floodplain
- Wetlands
- Public Waters
- Impervious Surface
- Shoreland Buffer

Date Approved: _____

Reviewer Initials: _____

Notes:

