

Application for a Conditional Use Permit



INSTRUCTIONS

Before you apply for a Conditional Use 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 Land Services Office
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 Conditional Use including, if applicable:
 - Hours of operation;
 - Number of employees;
 - Parking;
 - Lighting;
 - Noise;
 - Signage;
 - Garbage and sewage handling; and
 - Physical changes to the property such as tree removal or dirt moving.
- Description of how the Conditional Use may or may not impact your neighbors
- Site Plan
- Certificate of Compliance if property is located in Shoreland or Wild Scenic River Districts

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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 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

Ownership Verified: Y N

Date Staff Approved Application as Complete: _____

Setbacks

Planning Commission Date: _____

Floodplain

County Board Date: _____

Wetlands

60-Day Expiration Date: _____

Public Waters

Recording Order Number: _____

Impervious Surface

Reviewer Initials: _____

Notes:

