

# CITY OF HERMANTOWN SUBDIVISION APPLICATION

### **Subdivision Plan Approval Fees**

- Preliminary See Fee Schedule
- Final See Fee Schedule
- Combined Process See Fee Schedule

Submit the following to the City Clerk's Office

- Subdivision Application:\_\_\_\_\_\_
- Application for Zoning Certificate:\_\_\_\_\_\_
- Plat Plan showing the locations, dimensions, and nature of any structure involved, including setbacks from property lines:
- Names and addresses of all property owners within 350' of the affected property:

Upon receipt of the above information, a public hearing to held by the Planning and Zoning Commission will be scheduled. The Planning and Zoning Commission meets the third Tuesday of each month. In order to be placed on a particular Planning and Zoning Agenda, the above information must be submitted to the Clerk's Office one month before the scheduled meeting.

Notice of the public hearing will be published in the Hermantown Star at least 10 days prior to the public hearing, and all property owners within 350' of the affected property will be notified.

**Applicant Information** 

- Name:\_\_\_\_\_\_
- Address:\_\_\_\_\_
- Telephone Number:\_\_\_\_\_\_
- E-mail Address:\_\_\_\_\_\_
- Fax Number:\_\_\_\_\_\_

**Owner Information** 

- Name:
- Address:\_\_\_\_\_
- Telephone Number:\_\_\_\_\_\_
- E-mail Address:\_\_\_\_\_\_
- Fax Number:\_\_\_\_\_\_

### **Property Information**

- Land Address:
- Plat and Parcel:\_\_\_\_\_\_
- Legal Description: \_\_\_\_\_\_
- Activity Proposed: \_\_\_\_\_\_

Note: Attach plan showing the location, dimensions, and nature of any structure involved, including setbacks from property lines.

The undersigned does hereby make application for a zoning certificate for the activity described herein. This is only an application, it does not represent or guarantee approval.

Signature:		
Printed Name:		
Date:		

Office Use Only

- Fee:\_\_\_\_\_
- Payment Date:\_\_\_\_\_\_
- Receipt Number:\_\_\_\_\_\_

#### **Subdivison Application**

\_\_\_\_\_

#### **Applicant Information**

- Name:\_\_\_\_\_\_
- Address:\_\_\_\_\_
- Telephone Number:\_\_\_\_\_\_
- E-mail Address:\_\_\_\_\_\_
- Case Number:\_\_\_\_\_
- Authorized Representative:\_\_\_\_\_\_
- Legal Description:
- Address (if different from above):\_\_\_\_\_\_

#### **Proposed Setbacks**

- Side Yard Nearest (in feet):\_\_\_\_\_\_
- Side Yard Farthest (in feet):\_\_\_\_\_\_
- Front Yard Right of Way (in feet):\_\_\_\_\_\_
- Front Yard Road Center Line (in feet):\_\_\_\_\_\_
- Rear Yard Shoreline (in feet):\_\_\_\_\_\_
- Present Zoning:\_\_\_\_\_\_
- Description of Request: \_\_\_\_\_\_
- Justification of Request: \_\_\_\_\_\_
- Sketch Required:\_\_\_\_\_\_
- Sketch Received:

I hereby certify that I am the owner or authorized agent of the owner of the above property and that all uses will conform with existing State Laws and local ordinances. I further certify that I will comply with all conditions placed upon this permit should this application or any attachments thereto will serve to make this application and any resultant permit invalid.

Signature:	

Printed Name: \_\_\_\_\_

Date: \_\_\_\_\_

Mobile Home Information - Make:\_\_\_\_\_

Serial Number: \_\_\_\_\_



Some or all of the information that you are asked to provide on the attached application is classified by state law as either private or confidential. Private data is information, which generally cannot be given to the public, but can be given to the subject of the data. Confidential data is information which generally cannot be given to either the public or the subject of the data. Our purpose and intended use of this information is to consider your application. You are not legally required to provide this information. You may refuse to provide this information. The consequences of supplying or refusing to supply data are that your application may not be considered or it may be denied. Other persons or entities may be authorized by law to receive the information.



Year of Manufacture:	
Width:	Length:



# CITY OF HERMANTOWN ZONING CERTIFICATE APPLICATION

Application Number: \_\_\_\_\_ (Assigned by City Official)

#### **Applicant Information**

- Name:\_\_\_\_\_\_
- Address:
- Telephone Number:\_\_\_\_\_\_
- Fax Number:\_\_\_\_\_
- E-mail Address:\_\_\_\_\_\_

#### **Owner Information**

- Name:\_\_\_
- Address:\_\_\_\_\_
- Telephone Number:\_\_\_\_\_\_
- Fax Number:
- E-mail Address:\_\_\_\_\_\_

#### **Property Information**

- Land Address:\_\_\_\_\_\_
- Legal Description:\_\_\_\_\_\_
- Activity Proposed:\_\_\_\_\_\_\_

Note:

• Attach plat plan showing the location, dimensions, and nature of any structure involved, including setbacks from property lines.

The undersigned does hereby make application for a zoning certificate for the activity described herein. This is only an application, it does not represent or guarantee approval.

Signature:	
<b></b>	Tennessen Warning - Data Practice Advisory
Date:	Some or all of the information that you are asked to provide on the attached application is classified by state law as either private or confidential. Private data is information, which generally cannot be given to the public, but can be given to the subject of the data. Confidential data is information which generally
Office Use Only:	
• Fee:	cannot be given to either the public or the subject of the data. Our purpose and intended use of this information is to consider your application. You are not legally required to provide this information. You may refuse to provide this
Payment Date:	information. The consequences of supplying or refusing to supply data are that your application may not be considered or it may be denied. Other persons or entities may be authorized by law to receive the information.
Receipt Number:	City of

