TOWNSHIP COOPERATIVE PLANNING ASSOCIATION

4111 11TH Avenue SW—Room 10 | Rochester, MN 55902 | PH: (507) 529-0774 | FX: (507) 281-6821

ZONING CERTIFICATE APPLICATION

PLAT & PARCEL #: TOWNSHIP:	SITE PLAN DRAWING (Your application cannot be processed without this information.)
To this in .	Proposed building location with distances marked to all lot lines and all other structures on the site.
OWNER/APPLICANT CONTACT INFORMATION:	Property lines in relation to streets and/or roads.
Name:	 Location of septic tanks and drain field with distances marked to all existing and proposed structures. Location of well and distances marked to all existing and proposed structures.
Mailing Address:	
City:State:Zip:PH #:	
PERMIT PROPERTY INFORMATION:	
Site Address:	
City:State:	
Legal Description:	
DESCRIPTION OF WORK:	
New Addition Alteration Repair Demolish	
Mobile Home Ag Setback Moved Use Change Other	
Use of New Structure:	
SIGNATURE:	
I hereby acknowledge that I have read the above application and certify that the information contained therein is correct.	
Date:	NOTES:
Applicant Signature:	If the application for construction of a structure is to be used for animal housing; as owner or operator you must comply with all agencies overseeing animal feedlots. Contact your local Feedlot
ZONING APPROVAL: Permit #: Date: Zoning District:	Technician for further details (507) 280-2850. This permit becomes null and void if work or construction authorized is not commenced within 180
	days, or if construction or work is suspended or abandoned for a period of 180 days at any time
Required Yards (minimum):	 after work has commenced. If applicant disturbs one acre or more of soils area during a project; applicant must apply and be
Front: Side (interior):	issued a NPDES permit from MPCA.
Rear: Side (street):	 If applicant intends to bury old building materials during demolition, must obtain permit from MPCA if required.
Special Conditions:	Health Department Special Conditions: Permit #: Fee Paid: \$
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Approved by: Date:	Approved by: Date: