TOWNSHIP COOPERATIVE PLANNING ASSOCIATION

4111 11th AVENUE SW, Rochester, MN 55902
507-529-0774

CONDITIONAL / INTERIM USE PERMIT APPLICATION

Complete Page 1, provide the information on Page 2, and the application fee payable to TCPA.

TOWNSHIP: _____

Subject Property Address: _____

City:_____ State: _____ Zip: _____

Legal Description of Property and/or Parcel Number(s) (attach additional sheets as necessary): _____

_____

_____

PROPERTY OWNER (print name): _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____ Email: _____

Owner Signature: _____ Date: _____

APPLICANT (print name): _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____ Email: _____

Applicant Signature: _____ Date: _____

REQUEST FOR (circle one): CONDITIONAL USE (runs with the land) INTERIM USE (specific to owner)

Description of requested use(s): _____

_____

Existing property use: _____

Existing property zoning:_____

Has there been a previous request for rezoning, variance, or conditional/interim use on this property?

YES _____ NO _____ If Yes, when: _____

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CUP / IUP CHECKLIST

Site Plan:
To scale and containing the following information as applicable:

- Property Boundaries, dimensions, and acreage
- Location and dimensions of existing and proposed buildings and their intended uses
- Building setback dimensions
- The location of Easements (existing and proposed)
- Access to public streets/rights-of-way (label streets)
- Entrances, driveways and traffic flow
- Parking layout (employee, guests, service vehicles, delivery/loading zones, ADA)
- Exterior lighting locations
- Landscaping and screening buffers, including retaining walls and fencing
- Well and septic locations or plans
- Signage for commercial properties/uses
- Heating/Cooling Unit locations for commercial properties/uses
- Walkways, sidewalks, recreation and common areas

Business Plan:
In narrative format and addressing the following information as applicable:

- Business description
- Daily hours of operation
- Year round or seasonal (months) of operation
- Total number of employees
- Shift hours and total number of employees per shift (as applicable)
- Maximum number of guests/clients to be served on-site.
- Trips generated (per ITE – Institute of Transportation Engineers)
- Mitigation plans for any new nuisances or environmental concerns generated by the new business
- Security plan/measures
- Waste management plan including hazardous and/or medical waste disposal
- Dust or noise control plan (as applicable)
- Future development plans and/or phasing (as applicable)
- State and/or County permits required for business operation
- Any additional information pertinent to the application

Additional information that may be required:

- Drainage, grading and/or stormwater plans
- Noise Study
- Lighting Plan
- Traffic impact study/analysis
- Decommissioning plan

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For Administrative Use

TCPA:

Complete application received including signed application, site plan/map, business plan and application fee:

Date: _____

TCPA Signature: _____

Scheduled Hearing Date: _____

PLANNING COMMISSION:

Reviewed by the Planning Commission on the following date: _____

Check One:

Approved: _____

Denied: _____

Denied for the following reason(s): _____

_____

_____

_____

Chairperson's Signature: _____ Date: _____