



CITY OF
MILACA *Minnesota*

255 First Street East, Milaca, MN 56353

(320)983-3141 | (320)983-3142 fax

CONDITIONAL USE PERMIT APPLICATION

ADDRESS OF PROPERTY FOR CONDITIONAL USE PERMIT REQUEST

CURRENT ZONING DISTRICT

PROPERTY OWNER INFORMATION

NAME: _____

ADDRESS: _____

STREET ADDRESS

CITY

STATE

ZIP CODE

TELEPHONE: () _____ HOME

() _____ CELL

E-Mail Address _____

APPLICANT INFORMATION (IF DIFFERENT FROM PROPERTY OWNER INFORMATION)

NAME: _____

ADDRESS: _____

STREET ADDRESS

CITY

STATE

ZIP CODE

TELEPHONE: () _____ HOME

() _____ CELL

E-Mail Address _____

The following information is submitted in support of this application:

- Completed Application for Conditional Use Permit
- NON REFUNDABLE Fee of \$300
- \$500 Escrow
- Full legal description of property (*Not from your property tax statement*)
- Depending on the Conditional Use Permit requested, the following may be required:
 - 8 copies of a Site Plan
 - 8 copies of a Sign Plan
 - 8 copies of any other appropriate plans or drawings
- A narrative explaining the purpose of the request, the exact nature of the Conditional Use Permit and the justification of the request
- Other

.....

I fully understand that all of the above required information must be submitted at least 20 days prior to the Planning Commission meeting to ensure review by the Planning Commission on that date.

Property Owner Signature **Date**

COMMENTS/REVISIONS: _____ _____

For more information in regard to Conditional Use Permits, go to <https://codelibrary.amlegal.com/codes/milaca/latest/overview> and search for 156.150

.....

CITY STAFF RECEIVING APPLICATION: _____

DATE: _____ AMOUNT PAID: _____

RECEIPT # _____