

**FORM A**

Big Stone County  
 Environmental Services  
 20 2nd St. SE  
 Ortonville MN 56278

**BIG STONE COUNTY  
 ZONING APPLICATION  
 SUMMARY FORM**

Application # 08  
 Parcel #

email: [ronda.maas@co.big-stone.mn.us](mailto:ronda.maas@co.big-stone.mn.us) and [darren.wilke@co.big-stone.mn.us](mailto:darren.wilke@co.big-stone.mn.us)

Applicant's Name:

---

Authorized Agent:

---

Contact Address (Street, City, State, Zip):

---

911 Address of Property:

---

Day Phone: Evening Phone: Cell Phone:

Subdivision Name, Lot(s) and Block # (Ex. Paulsen Shores, Lot 6, Block 2)	Section	Township	Range	Qtr./Qtr.	Gov. Lot
---	---------	----------	-------	-----------	----------

\*\*\*\*\*Note: If the property has a metes & bounds description, attach a copy of the exact legal description

**Check Applicable Zoning Districts**

- Residential
- Agricultural
- Commercial
- Industrial
- Shoreland - Lake/River Name \_\_\_\_\_
- Floodplain
- Other \_\_\_\_\_

**Check Applicable Zoning Permits**

- Building Permit
- Sewer Permit
- Conditional Use Permit
- Variance Permit
- Land Alteration Permit
- Subdivision
- Zoning District Change
- Ordinance Amendment

I hereby certify that all the data within my application is true and correct to the best of my knowledge:

\_\_\_\_\_  
 Title Landowner's Signature

\_\_\_\_\_  
 Date

**FOR OFFICE USE ONLY**

	CUP Notices	Variance Notices	Fees:
Newspaper-Ort. Independent/N.Star Applicant	_____	_____	\$25
Plan. Commission/BOA	_____	_____	\$50
Proximity Owners	_____	_____	\$80
Twp. Officials	_____	_____	\$150
Cty. Engineer	_____	_____	\$200
DNR - Div.of Water/Parks	_____	_____	\$350
Hearing Date	_____	_____	\$500
Application Approved/Denied	_____	_____	\$625
Conditions - Yes/No	_____	_____	
Recorded	_____	_____	
Certificate of Elevation	_____	_____	
Certificate of Occupancy	_____	_____	
File copied and closed	_____	_____	

SUPPLEMENTAL DATA  
FOR ZONING DISTRICT CHANGE

Application # 010
Parcel #

<b>Name of Applicant:</b>	
<b>Contact Person:</b>	<b>Contact Phone #</b>
The above named individual, firm or corporation hereby respectfully submits the following supplemental data in support of the preliminary information provided on the accompanying Application Summary Form (FORM A) for the purpose of securing an amendment to the official zoning map.	

**PROJECT INFORMATION**

1. Area of subject property in sq.ft. or acres: _____		
2. Present Zone: _____		
3. Proposed Zone: _____		
4. Describe briefly the nature of the proposed zone change: _____ _____ _____ _____		
5. Other circumstances which justify the zoning change: _____ _____ _____		
I hereby certify that all the data within my application is true and correct to the best of my knowledge:	_____ Title Landowner's Signature	_____ Date

**ORDER GRANTING OR DENYING ZONING DISTRICT CHANGE**

In accordance with Section \_\_\_\_\_, of the Big Stone County \_\_\_\_\_ Ordinance, the BIG STONE COUNTY BOARD OF COMMISSIONERS hereby \_\_ **Approves/** \_\_ **Denies** the foregoing Application for a Zoning District change. If approved, said approval is subject to any conditions specified in the Decision section of the Findings of Fact.

BY ORDER OF: \_\_\_\_\_, Environmental Officer for Big Stone County, dated \_\_\_\_\_.

\*\*\*\*\*SEE FINDINGS OF FACT FOR SPECIAL CONDITIONS\*\*\*\*\*

**FORM H**

Application # 010
Parcel #

**SKETCH PLAN**

Bird's Eye View of Site & Surrounding Area

Please be as complete as possible. Include all of the items listed below where applicable.

- |  |   |
|--|---|
| <input type="checkbox"/> Scale                     | <input type="checkbox"/> Location of All Existing Structures              |
| <input type="checkbox"/> North Arrow               | <input type="checkbox"/> Location of Wetland Areas                        |
| <input type="checkbox"/> Lot Dimensions            | <input type="checkbox"/> Existing Local Drainage                          |
| <input type="checkbox"/> Structure Location        | <input type="checkbox"/> Location of Ordinary High Water Level (OHWL)     |
| <input type="checkbox"/> Sidelot Setback           | <input type="checkbox"/> Setback from OHWL                                |
| <input type="checkbox"/> Road Setback              | <input type="checkbox"/> Nearest Excavation to OHWL (if walkout basement) |
| <input type="checkbox"/> Location of all Wells     | <input type="checkbox"/> Filling/Grading Limits                           |
| <input type="checkbox"/> Location of Septic System | <input type="checkbox"/> Vegetation Alteration Limits                     |