BUILDING/ZONING SPECAIL REQUEST APPLICATION



Office of Clerk/Treasurer • 410 Euclid Avenue • PO Box 9 • Milroy, MN 56263 • (507) 336-2495

Property Owner:			
Mailing Address:	Phone:		
City, State Zip:	Email:		
PROPERTY INFORMATION			
Property Address:	Parcel Number:		
Property Type: Residential	Commercial Industri	ial	
PROJECT INFORMATION			
Rezoning (\$200.00)Conditional Use Permit (\$300.00)Variance (\$300.00)Adult Use Business (\$5,000.00)	Dimensions of Project:		
	Length: Width:		
	Height: Area:		
Reason for Special Request:			
1. Will the proposed change be suitable so as not to create excessive burden on existing parks, schools, streets, parking supply, and other public facilities which serve or are proposed to serve the area? Yes: No:			
Please explain:			
Will the proposed change be sufficiently compatible or separated by distance or screening from adjacent residentially zoned or used property? Yes: No:			
Please explain:			
3. Please describe the proposed use of the property:			
4. Does the site have adequate utilities, access roads, drainage and necessary infra-structure facilities?			
Yes: No:			

OWNER STATEMENT

permit will be made following the ordinances of the City of Milroy.		
I understand that this is a permit application and work is not to start without a permit.		
Owner Signature:	Date:	

I, the owner, agree to pay the required fee for this special application at time of request and understand that this request be refused, the fee will not be returned. I also understand that should this request be granted, application for a building/zoning

FILING INSTRUCTIONS

The application must be fully completed with true and correct information. The property owners' signature is required for all applications. Incomplete applications or applications with insufficient information will delay the processing. Applications shall be submitted to:

City of Milroy 410 Euclid Avenue PO Box 9 Milroy, MN 56263