



Application Number: \_\_\_\_\_

Related Records: \_\_\_\_\_

**Olmsted County Planning Department**

2122 Campus Dr SE, Suite 100

Rochester, MN 55904

P: 507-328-7100 F: 507-328-7958

planningweb@olmstedcounty.gov

**LAND DEVELOPMENT APPLICATION**

**Type of Application**

Is this an amendment to an existing application?

Yes

No

Appeal

+Conditional Use Permit

Temporary Construction

Home Occupation (CUP)

Erosion Control/Grading

\*+Final Plat - # lots \_\_\_\_\_

Floodplain/Shoreland Development

General Development Plan \_\_\_\_\_

(name)

Land Use Plan Amendment \_\_\_\_\_ to \_\_\_\_\_

\*+Metes & Bounds:

\*^+Preliminary Plat - # lots \_\_\_\_\_

+Variance

Rezoning \_\_\_\_\_ to \_\_\_\_\_

*\* Relates to GIS Impact & E911  
Addressing Fees*

*+ Relates to Environmental Review  
Fees*

*^ Relates to Subdivision Review  
Fees*

**Site Location**

Legal Description Attached

Site Address:

# of Acres:

PIN(s):

Township/Section:

**Proposal (Full documentation must accompany application)**

Describe project in detail: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Applicant**

Full Name:

Phone:

Email:

Mailing Address:

Typed/Printed Name:

Signature:

Date:

**Property Owner**

Full Name:

Phone:

Email:

Mailing Address:

Typed/Printed Name:

Signature:

Date:

Application Number: \_\_\_\_\_

Related Records: \_\_\_\_\_

**Consultant**

Full Name:

Phone:

Email:

Mailing Address:

Typed/Printed Name:

Signature:

Date:

**PLANNING DEPARTMENT SUBMITTAL – For office use only**

Note: Applications only accepted with ALL required support documents.

Deadline for agency action:      60 days - \_\_\_\_\_      120 days - \_\_\_\_\_

Received & reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

Development Application Fee: \_\_\_\_\_

Environmental Review Fee (CUP, Plats, M&B, Variance): \_\_\_\_\_

GIS Impact Fee (M&B, Plats): \_\_\_\_\_

E911 Addressing Fee (Final Plats, M&B): \_\_\_\_\_

Subdivision Review Fee: \_\_\_\_\_

**Total fees due:** \_\_\_\_\_