

CITY OF NASHWAUK

**APPLICATION FOR ZONING PERMIT
(ORDINANCE REFERENCE-SECTION 17)**

Please carefully complete this application. Failure to supply all of the required information will result in the application being denied or returned.

Name of Applicant: _____

Mailing Address: _____

Telephone Number: _____

1. Legal Description of Property:

2. Property Size: width _____ ft. depth _____ ft. _____ acres

3. Location of Property: (Address, Street/Road)

4. Existing Zoning Classification: _____

5. Existing or proposed use of the buildings and/or land:

6. The number of families, house keeping units, or rental units the building is designed to accommodate: _____

7. Existing conditions on the lot: _____

8. Include detailed building and plat plans (in duplicate), drawn to scale, showing the actual dimensions and shape of the lot to be built on, the location, size and arrangement of all existing and proposed buildings, structures, driveways and drainage or alterations all in relation to the lot lines.

9. Appropriate fees shall be included and application must be complete to be accepted.

10. Applicant's Signature: _____

11. Date Received (to be filled in by Zoning Office): _____

12. Date of Approval or Denial (circle one): _____