

PLANNING REQUEST

CITY OF HAM LAKE

15544 Central Avenue NE Ham Lake, MN 55304

Phone (763) 434-9555 Fax (763) 235-1697

Date of Application	Date of R	Date of Receipt	
	Receipt #	Amount \$	
Meeting Appearance Dates:			
Planning Commission	City Council		
Please check request(s):			
Metes & Bounds Conveya	ance Commercial	Building Permit	
Sketch Plan	Certificate o	f Occupancy	
Preliminary Plat Approva	I* Home Occup	ation Permit	
Final Plat Approval	Conditional t	Use Permit (New)*	
Rezoning*	Conditional l	Use Permit (Renewal)	
Multiple Dog License*	Other		
*NOTE: Advisory Signage is required fo application also requires a Pub	or land use alterations and future blic Hearing. Such fees shall be o		
Development/Business Name:			
Address/Location of property:			
Legal Description of property:			
PIN #	Current Zoning P	roposed Zoning	
Notes:			
Applicant's Name:			
Business Name:			
Address			
City			
Phone Cell	Phone I	⁻ ах	
Email address			
You are advised that the 60-day review not begin to run until <u>all</u> of the required		-	
SIGNATURE	DATE	DATE	
*************	************	*********************	
_	OR STAFF USE ONLY -		
ACTION BY: Planning Commission	PROPERTY TAX	ES CURRENT YES NO	
City Council	Any Active/Deferre	ed Assessments YES NO	

NOTICE TO ALL APPLICANTS FOR MUNICIPAL PERMITS, LICENSES, OR OTHER MUNICIPAL ACTION

- 1. If you are requesting municipal action on any request for any of the above, you will be required to furnish certain information about yourself, the project you are involved in, or other matters pertaining to the subject. Some of the information you are asked to provide is classified by state law as either private or confidential. Private data is information which generally cannot be given to the public but can be given to the subject of the data. Confidential data is information which generally cannot be given to either the public or the subject of the data.
- 2. The purpose of this information is to enable the City Staff, Commissions, Council or other government agencies to evaluate relevant factors in considering your request. You are not legally required to provide this information. If you do not provide the requested information, the City may not act upon your request.
- 3. The information you supply <u>will be public</u> and available to any entity requesting to inspect the information.

DATA PRACTICES ADVISORY TENNESSEN WARNING REQUIRED BY MINNESOTA STATUTES CHAPTER 13.04

CITY OF HAM LAKE ACKNOWLEDGMENT OF RESPONSIBILITY TO REIMBURSE EXPENSES

The undersigned,	, having applied to the City of Ham
Lake for consideration of a planning and	l zoning request, or any other permit, license,
or action requiring review and/or approva	al of the City, as follows:
Туре	of Application
acknowledges that the sum of \$, has been deposited with the City of Ham
Lake to reimburse the City of Ham Lake f	or any out of pocket expenses incurred by the
City in reviewing the proposal, including	ng but not limited to a staff review fee, any
signage required by ordinance, and City	y Engineer and City Attorney's fees for their
review, in amounts which are not know	wn to the City at this time. The applicant
acknowledges that it is the responsibilit	y of the undersigned to reimburse the City for
any such engineering or attorney's fees	incurred in review of the applicant's request,
	ty in connection with this requires, and further
-	the undersigned fails to promptly remit any
•	of the deposit, the City shall have the right to
	on upon the undersigned's request, shall have
	Iraw any permits, licenses or other consents,
	et or road, plat or other dedication, and the
	mages arising out of any such act by the City.
	in the event that the City is required to take
,	any of the expenses incurred by the City from
	tled, in addition to principle and interest, to
	incurred in collecting said sums from the
undersigned.	
Applicant Signature	Dated
The following statement must be signed	if the applicant is not the property owner:
, as owner of	f the property involved in the foregoing
application, agrees to be jointly and seve	erally liable for payment of the foregoing fees.
I am aware of the application being s	ubmitted by the applicant and approve the
request.	
Business to Occur. C: 4	
Property Owner Signature	Dated