



Application for Land Use Permit-Existing Residential
Residential Remodeling, Maintenance, and Additions to Existing Structures; Accessory Structures

The City of Ashby is an equal opportunity provider & employer.

Ashby City Hall
203 West Main
PO Box 320
Ashby, MN 56309

Phone 218-747-2876 Fax 218-747-2886

Date: _____ Estimated Cost of Project: \$ _____
Fee Paid: _____
(\$5.00 for each \$10,000)

Street Location of Property _____ **And**
Legal Description of Property:

Owner: Name: _____ Phone: _____
Address: _____
City: _____ State: _____ Zip: _____

Applicant (If other than owner):
Name: _____ Phone: _____
Address: _____
City: _____ State: _____ Zip: _____

- Residential requirements are as follows-you must follow these requirements in order to receive a land use permit:**
(1) Setbacks.
- *Front yards.* Not less than 30 feet; except in the case of existing structures, the front set-back will be determined to be in-line with those existing structures on that same street.
 - *Side yards.* Minimum of 6 feet on one side and 8 feet on the other from outer edge of eaves to lot line.
 - *Rear yards.* 15 feet
 - *Detached accessory building setback requirements.* At least 18 inches from edge of eaves to lot line. Accessory building in the front yard must follow the 30 foot set-back requirement.
 - *Access.* All lots shall front on and have ingress and egress by means of a public right-of-way.

IF YOU ARE INSTALLING A FENCE – PLEASE REFER TO REQUIREMENTS AND SETBACKS IN THE ZONING ORDINANCE.

Description of Request:

Has an application for the request been previously sought? _____ When? _____
By signing this application, I assert that these state are true and correct to the best of my knowledge. I also agree to follow the above-mentioned set-back requirements.

Signature of Applicant Date

If applicable, please use the back-side of the application to show lot lines, street names, distance from side and rear lot lines, setback from front lot line to structure. For garage, show distance from garage to house, garage to side or rear lot lines. Show North direction.

Office use only _____ Approved _____ Denied _____ Need Planning Commission Approval _____ Date

Reason _____
