

Conditional Use/Rezoning or Variance Application



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

Application for Consideration of Planning Request

(\$150.00 at time of application plus filing fees)

Type of request: _____ Variance _____ Conditional Use Permit _____ Rezoning _____ Other

Street Location of Property and/or Legal Description _____

Parcel ID # _____

Owner: Name: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Description of Request:

Reason for Request:

Has an application for the request been previously sought? _____ When? _____

I hereby certify that I have read this application and state that the above information is correct and that I am the owner or duly authorized agent of the owner. I agree that all work will comply with all ordinances and codes of the City of Ashby and the State of Minnesota. I hereby authorize representatives of the City to enter upon the above-mentioned property for inspection purposes. As the Applicant, I understand that the City Council may request the attendance of myself or a representative at the meeting(s) where the request will be considered. Upon notice from the City, I understand that I am responsible for reimbursing the City for all costs, above and beyond the application fee, for professional services including but not limited to: engineering, legal and financial advising, incurred by the City in connection with matters related to my request and enforcement of performance.

Signature of Applicant _____

Date _____

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. If applicable, include landscaping, off-street parking, grade elevation of streets and location of access drives. Show North direction.

Office use only

Hearing Date: _____ Approved _____ Denied _____

Reason _____