

# APPLICATION FOR A LAND USE PERMIT

Permit #

Please carefully complete (PRINT) this application according to the instructions. Failure to fill in all of the required information may result in a delay of processing your application. A fee of \$\_\_\_\_\_ made payable to **Canosia Township** must accompany this application.

Name of Applicant: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone Number: Work \_\_\_\_\_ Home \_\_\_\_\_  
Site Address: \_\_\_\_\_  
Primary Access Road: \_\_\_\_\_

## PROPERTY DATA

Please print out the entire legal description, or attach a photocopy. The legal description can be found on the deed, abstract, or property tax statement.

Legal Description: \_\_\_\_\_  
\_\_\_\_\_

Parcel Code: \_\_\_\_\_ Section # \_\_\_\_\_ Township # \_\_\_\_\_ Range # \_\_\_\_\_

Shoreland Frontage? YES NO Name of Lake/River/Stream: \_\_\_\_\_

What is your lot width at the shoreline? \_\_\_\_\_ft.

Property size: Width at building site \_\_\_\_\_ft. Depth \_\_\_\_\_ft. \_\_\_\_\_acres

Ownership: Private \_\_\_\_\_ Public \_\_\_\_\_ Leased from: \_\_\_\_\_

List all existing structures and their dimensions: \_\_\_\_\_  
\_\_\_\_\_

Has there been any construction on your property since 1972? YES NO If yes, list. \_\_\_\_\_  
\_\_\_\_\_

Number of existing bedrooms: \_\_\_\_\_

LUP Rev 1-98



**ENVIRONMENTAL DATA**

Does your property contain low areas, wetlands, or areas with standing water for more than two weeks between May 1 and September 15? Yes No If yes, do you intend to drain, fill, or otherwise alter this area for any reason?  
 YES NO If yes, explain:

\_\_\_\_\_

Type of septic system: \_\_\_\_\_ Permit number: \_\_\_\_\_  
 (see instructions)  
 Year installed \_\_\_\_\_

**ALL APPLICANTS MUST SIGN BELOW**

I hereby certify that I am the owner or authorized agent of the owner of the above property and that all uses will conform to the provisions of the Canosia Township official controls. I further certify that I will comply with all conditions placed upon this permit should this application be approved. Intentional or unintentional falsification of this application or any attachments thereto will serve to make this application and any resultant permit invalid. I also authorize Township staff to inspect the property during review of the application during a reasonable time of day.

APPLICANT \_\_\_\_\_ DATE \_\_\_\_\_

**OFFICE USE ONLY**

Land use district	_____	Floodplain	YES	NO
Lake #	_____	Bluff impact zone	YES	NO
Shoreland district	_____	Wetlands present	YES	NO
Revenue code	_____	Field check	YES	NO
Date approved	_____	Approved by	_____	
Receipt #	_____	Receipt date	_____	
Health Dept. authorization required		YES	NO	
Performance standards attached		YES	NO	
Comments:	_____			

**RETURN THIS APPLICATION TO:**

Canosia Township Planning & Zoning  
 Zoning Administrator  
 4896 Midway Rd  
 Duluth, MN 55811  
 Phone 729-9833

# SITE PLANNING SKETCH FORM

**ABOUT THE SKETCH:** This sketch is to graphically illustrate your proposed project(s). Include all locations and labels of wells, septic system, septic expansion area, driveway, access roads, wetlands, and areas of vegetation removal and grading. Label the location(s) and size(s) of all existing and proposed structures and indicate distances to property lines, shore, road centerline, etc.

	<b>Proposed Structure #1</b>	<b>Proposed Structure #2</b>	
<b>STRUCTURE TYPE</b>			
	<b>Project (Structural) Setbacks (Horizontal Distance)</b>		
<b>Side-yards are the side property lines.</b>	Side Yard Near	Feet	Feet
	Side Yard Far	Feet	Feet
	Rear Yard	Feet	Feet
	Shoreline Distance	Feet	Feet
	Road Centerline	Feet	Feet

**MAKE SURE ALL THESE DISTANCES AND LABELS ARE ON THE SKETCH**

<b>Scale:</b> <i>Feet/Per inch</i>	<b>IS A HEALTH DEPT AUTHORIZATION REQUIRED?</b> YES      NO <input type="radio"/> Permit to Construct <input type="radio"/> Certificate of Compliance <input type="radio"/> Record Review Current Septic Status _____		