



Rezoning Application

I. Applicant:

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____ Email: _____

II. Landowner:

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____ Email: _____

III. Location Information:

PID #: _____ Parcel Acreage: _____

Property Address: _____

City: _____ State: _____ Zip: _____

Attach Full Legal Description (NOT abbreviated description from tax statement)

Township: _____ Section: _____ Quarter-Quarter: _____

Subdivision: _____ Lot: _____ Block: _____

IV. Township Notification: Township must be notified of proposed rezoning prior to application.

(Township Name) Township notified on: _____
(Date)

Board Member _____ regarding the proposed rezoning.
(Name)

V. Municipality Review: Required if the proposed rezoning is within 1 mile of an incorporated area.

(Name of City) City notified on: _____
(Date)

Staff Member _____ regarding the proposed rezoning.
(Name)

Comments: _____

VI. Quantities and Submittal Formats:

- a. One (1) reproducible 8 ½“ x 11” copy of the application and all other supporting documents.
- b. If any documentation is in color, an aerial photo, photographs, or larger than 8 ½“ x 11”, must be submitted.
- c. Electronic version of any supporting documents is preferred, *if available*.
- d. Additional information may be requested as deemed necessary by the Department.
- e. Application must be made **in person** by the applicant and/or landowner no later than 12 P.M. on the date of application deadline.
- f. **Appointment is necessary.**

VII. Fees: Must be paid at the time of application.

- o Rezone \$ 750
- o Filing Fee \$ 46
- o Special Meeting \$ 2,000 (Additional fee)

VIII. Site Plan: A certified land survey of the property to be rezoned shall include but not limited to:

- Existing uses and structures of adjacent properties within 500 feet in the incorporated area and within ½ mile in the unincorporated area.
- Zoning of adjacent properties
- Location
- Lot Dimensions
- North Point
- Setbacks
- Property Lines
- Road Right-of-Way
- Existing Structures
- Existing Septic System(s)
- Existing Well(s)
- Existing Access (size & location)
- Proposed Access (size & location)
- Existing Easements
- Water Feature(s) & Wetland(s) (if any)
- Concept Plan showing potential development that would result from the proposed rezone.

IX. Rezone Request:

_____ acres from the _____ District to the _____ District
_____ acres from the _____ District to the _____ District
_____ acres from the _____ District to the _____ District

X. Description of Request:

a. A detailed written description of the area to be rezoned must be attached.

b. Include the following information with regard to the proposed rezone request.

1. CURRENT ZONING DISTRICT CLASSIFICATION: _____

2. CURRENT OVERLAY DISTRICT CLASSIFICATION: _____

3. EXISTING USE OF THE SUBJECT PARCEL(S): _____

4. PROPOSED USE OF THE SUBJECT PARCEL(S): _____

5. CONCEPT PLAN: (*attach*) _____

6. SOIL TYPE THROUGHOUT THE SUBJECT PARCEL(S): _____

7. EXPLAIN HOW THE SOIL TYPE OF THE AREA SUPPORTS THE PROPOSED REZONE: _____

8. DESCRIPTION OF THE SURROUNDING NATURAL FEATURES (lakes, streams, bluffs, wetlands, etc.): _____

9. DESCRIBE THE POTENTIAL IMPACT TO THE ABOVE LISTED NATURAL FEATURES: _____

10. DESCRIBE THE OVERALL CHARACTERISTIC AND DEVELOPMENT PATTERN WITHIN THE IMMEDIATE VICINITY OF THE SUBJECT PARCEL(S): _____

11. DESCRIBE HOW THE PROPOSED REZONE SUPPORTS THE OVERALL CHARACTERISTIC AND DEVELOPMENT PATTERN WITHIN THE IMMEDIATE VICINITY OF THE SUBJECT PARCEL(S): _____

12. DESCRIBE THE NECESSARY INFRASTRUCTURE FOR UTILITIES, ACCESS ROADS, DRAINAGE, ETC. NEEDED TO SUPPORT FUTURE DEVELOPMENT: _____

13. DESCRIBE ANY POTENTIAL POLLUTION HAZARDS THAT COULD RESULT FROM THE FUTURE DEVELOPMENT ALLOWED WITHIN THE REQUESTED ZONING DISTRICT: _____

14. DESCRIBE HOW THE PROPOSED REZONE WOULD IMPACT THE PROTECTION OF THE PUBLIC’S HEALTH, SAFETY, AND GENERAL WELFARE: _____

15. DESCRIBE HOW THE PROPOSED REZONE SUPPORTS THE LISTED GOALS IN THE COUNTY’S LAND USE PLAN: _____

16. LIST ANY ADDITIONAL LICENSING AND/OR PERMITTING REQUIRED TO INITIATE DEVELOPMENT ON THE SUBJECT PARCEL(S): _____

XI. Attachments: shall include but not limited to:

- **Description of Request** – *See Part X for details*
- **Site Plan for Existing Conditions** – *See Part VIII for details*
- **Concept Plan** – *See Part VIII*
- **Full Legal Description** – *Not abbreviated description from tax statement*
- **Access Approval** – *Attached approval from the applicable road authority*
- **Township Notification** – *See Part IV*
- **Municipality Notification** (if applicable) – *See Part V*
- **Septic Compliance** (if applicable) – *Check with Environmental Services to determine if this is needed*

XII. Procedure:

The Planning & Zoning Commission shall hold a public hearing on the proposed Rezone at a scheduled Planning and Zoning Commission meeting.

The Planning and Zoning Commission is an advisory board to the County Board of Commissioners and will make a recommendation to the County Board.

The Department shall report the *findings* and the recommendations of the Planning Commission to the County Board for final decision.

Action by the County Board shall be a majority vote of its members.

The Department shall notify the applicant and/or landowner in writing of the County Board decision.

A certified copy of the County Board decision shall be filed with the Le Sueur County Recorder by the Department.

XIII. Signatures:

I hereby certify with my signature that all data contained herein as well as all supporting data are true and correct to the best of my knowledge.

Applicant Signature

Date

I hereby certify with my signature that all data contained herein as well as all supporting data are true and correct to the best of my knowledge.

Property Owner Signature

Date

***** OFFICE USE ONLY *****

DATE RECEIVED: _____	ZONING: _____	BLUFF: Y N
15 DAY DEADLINE: _____	FEMA PANEL: 27079C _____ D	WATER COURSE: Y N
60 DAY DEADLINE: _____	FLOOD ZONE: _____	FEEDLOT: Y N
<input type="checkbox"/> Township Comments	<input type="checkbox"/> Site Plan (Existing)	<input type="checkbox"/> Septic Status
<input type="checkbox"/> Municipality Comments	<input type="checkbox"/> Concept Plan	<input type="checkbox"/> COC _____
<input type="checkbox"/> Project Description	<input type="checkbox"/> Access Approval	<input type="checkbox"/> NONC/ WAIVER _____
<input type="checkbox"/> Legal Description	<input type="checkbox"/> Mineral Resources Form	<input type="checkbox"/> DESIGN _____
<input type="checkbox"/> COMPLETE	<input type="checkbox"/> INCOMPLETE	<input type="checkbox"/> HOLD
<input type="checkbox"/> Total Fee \$ _____		
Planning & Zoning Dept. Signature	Date	Permit #