



Application for Conditional Use Permit

www.co.redwood.mn.us

Permit #: _____ Date: _____

Location of Proposed Use:

Address: _____ City: _____ State: MN Zip: _____
House # Street Name

Parcel #: _____ Township: _____ Section: _____ Twp #: _____ Range: _____

Legal Description:

Information about the Site:

Zoning District: _____

NOTICE: Change of land use may
affect your property taxes.

General description of the building(s) and proposed use:

Building Size: (Please enter dimensions in feet)

Width: _____ Length: _____ Diameter: _____ Total Height: _____

Setbacks: (Please enter in feet)

Side Yard Setback: _____ Direction: _____

Side Yard Setback: _____ Direction: _____

Rear Yard Setback: _____ Direction: _____

Road Type: _____ Setback from the Right-of-Way: _____

Setback from the center of the road _____ ft

Type of Sewer System:

Drainage Plan:

Other Information:

Applicant Information:

First Name: _____ Last Name: _____

Business Name: _____

Address: _____ City: _____ State: MN Zip: _____

Home Phone: _____ Cell Phone: _____ Email: _____

Operator Information: (Complete only if different from Applicant)

First Name: _____ Last Name: _____

Business Name: _____

Address: _____ City: _____ State: MN Zip: _____

Home Phone: _____ Cell Phone: _____ Email: _____

Land Owner Information: (Complete only if different from applicant)

First Name: _____ Last Name: _____

Address _____ City: _____ State: MN Zip: _____

HomePhone: _____ CellPhone: _____ Email: _____

I affirm that the forgoing information is true and accurate. I understand that if any portion of this information is false or materially misleading, any conditional use permit issued in reliance upon this information is voidable at the election of Redwood County.

Land Owner Signature: _____ Date: _____

Office Use Only: * The section below is to be filled out by the Environmental Office Staff

Permit Fee: \$700.00 Receipt #: _____ Date Approved: _____

Application Received: _____

Commission Action:

County Board Action:

Approved: _____ Date: _____ Approved: _____ Date: _____

Disapproved: _____ Date: _____ Disapproved: _____ Date: _____