

CONDITIONAL USE PERMIT
INTERIM USE PERMIT
VARIANCE AND REZONING
APPLICATION FORM

PRINCETON TOWNSHIP
10039 55TH STREET
PRINCETON, MN 55371

(763) 389-4439 FAX: (763) 634-9107
EMAIL: ptownship@gmail.com

APPLICANT SIGNATURE:

_____ **DATE:** _____

PRINT NAME: _____

COMPANY:

ADDRESS: _____

TELEPHONE: _____ **EMAIL:** _____

OWNER SIGNATURE:

_____ **DATE:** _____

ADDRESS: _____

STREET LOCATION OF PROPERTY:

LEGAL DESCRIPTION OF PROPERTY:

DESCRIPTION OF REQUEST:

REASONS/JUSTIFICATION FOR REQUEST:

I further state that if this request is granted, I will proceed with the actual construction in accordance with the plans submitted within six (6) months from date of filing this application and will complete the work within _____ year(s) from said date and that I am able from a financial, legal and physical basis to do so.

NOTE: All submission requirements of the Princeton Township Zoning Ordinance found in Section 300:230 for Conditional Use Permits, 300:235 for Interim Use Permits and Section 300:220 for Variances and Section 300:210 for Variances shall be included with this application.

**Fees: Conditional Use Permit/Interim Use Permit/Variance: \$250.00
Rezoning: \$300.00
Escrow: \$1,000.00**

CLERK SIGNATURE: _____

DATE FEES RECEIVED: _____ **AMOUNT:** _____

Applicant Initial_____