



16319 Kettle River Blvd.
 Columbus, MN 55025
 Phone: (651) 464-3120 Ext.1011
 Website: www.ColumbusMN.us

**APPLICATION FOR CONSIDERATION OF: PRELIMINARY PLAT
 APPLICATION**

Application Information Form

APPLICANT/DEVELOPER:

Name: _____ Phone: _____ (Alt.): _____

Address: _____ Email: _____

City: _____ State: _____ Zip: _____

LANDOWNER: _____ Phone: _____

Address: _____ Email: _____

PIN Number or Numbers: _____

Is there an existing residential dwelling on the property: Yes ___ No ___

Number of Acres in Subdivision: _____ Number of New Parcels in Subdivision: _____

Preliminary Plat Submittals Check List:

Application Information Sheet (Permit)		<u>Information Recommended by Zoning Administrator:</u>
Legal Description of Property (attached)		
Affirmation of Sufficient Interest (Signed by applicant and property owner)		
Full Size Paper Copies of Preliminary Plat (4)		
Electronic Copy of Preliminary Plat		
Soil Boring Test (Indicating buildable & septic area for each lot)		
Proof of Contact from the following Agencies:	<ul style="list-style-type: none"> • Watershed District <input type="checkbox"/> • Army Corps of Engineers <input type="checkbox"/> • DNR <input type="checkbox"/> • Anoka County Highway Department <input type="checkbox"/> 	
Required Fees Paid		
Additional Information (further information that you believe is relevant and helps explains your request)		

Note: this checklist is an outline intended to provide a general statement of the required submittals for a Preliminary Plat. For exact requirements you should refer to the Columbus City Ordinance (Section 8-500) found in the Zoning Code available on the City website www.ColumbusMN.us



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In signing this application, I hereby acknowledge that I have read and fully understand the applicable provisions of the Zoning and Subdivision Ordinances and current administrative procedures. I further acknowledge the explanation as outlined in the application procedures and hereby agree to pay all statements received from the City pertaining to additional application expense.

SIGNATURE OF APPLICANT: _____ DATE: _____

For Office Use Only

Date Application Received _____ PC # _____ 120-Day Deadline _____

Permit Fee _____ Public Hearing Fee _____ Escrow Amount _____

Total Amount Paid _____

Date Paid _____ Check # _____ Receipt # _____

AFFIRMATION OF SUFFICIENT INTEREST

I hereby affirm that I am the fee title owner of the below described property or that I have written authorization from the owner to pursue the described action.

Name of Applicant:		
Address of Applicant:		
City:	State:	Zip:
Street Address of Subject Property:		
Legal Description of Subject Property:		
Signature:		Date:

If you are not the fee owner, attach another copy of this form which has been completed by the fee owner or a copy of your authorization to pursue this action.

If a corporation is fee title holder, attach a copy of the resolution of the Board of Directors authorizing this action.

If a joint venture or partnership is the fee owner, attach a copy of agreement authorizing this action on behalf of the joint venture or partnership.

This affirmation is not submitted in lieu of sufficient title evidence. You will be required to submit a title opinion, certificate of title, or title insurance policy showing your interest in the property prior to final action by the City Council.