COMMERCIAL & INDUSTRIAL LAND USE PERMIT APPLICATION

Planning and Zoning Department
13888 Dagget Bay Rd, Crosslake, MN 56442
218.692.2689 (phone) 218.692.2687 (fax)
Email - crosslakepz@crosslake.net

1. Land use permits and Individual Sewage Treatment System Permits are valid for two (2) years unless the Sewage Permit is to upgrade your system, which is then valid for ten (10) months.

2. All corners of the proposed structure(s) **and property lines** need to be staked with visible flags, ribbon, or lathes prior to onsite inspection by the City of Crosslake. **Staff highly recommends that the owner retain a licensed surveyor to mark these lines. If the owner chooses to mark without a survey, Staff approval will not confirm these lines. In other words, if a subsequent survey confirms that the lines were improperly marked, you may need to move a structure or buy land from your neighbor to correct the encroachment . _____ Initials**

3. It shall be a violation of the City of Crosslake Land Use Ordinance to commence construction before the permit application is approved by the City of Crosslake Planning and Zoning department. _____ **Initials**

4. The applicant or authorized agent may make application for a land use permit agreeing to do such work in accordance with all the City of Crosslake Ordinances. The applicant or authorized agent agrees that the application, site plan, and other attachments submitted herewith and which are approved by the City of Crosslake are true and accurate. The applicant or authorized agent agrees that, in making application for a land use permit, the property owner grants permission to the City of Crosslake, at reasonable times, to enter the property to determine compliance of the application with applicable local, county, or state ordinances or statutes. It is the applicant's sole responsibility to contact other local, county or state agencies to ensure the applicant has complied with all relevant local, county or state ordinances or statutes with Minnesota Statues 2015, section 216D.03 to 216D.07 attached. All construction associated with an approved permit shall be compliant with Minnesota Statutes 326B.121 – State Building Code; Application and Enforcement. _____ **Initials**

5. Please submit the following information with the application:
   - Property owner's signature
   - Total square footage of proposed structure(s)
   - Site sketch showing all setbacks
   - Property owner's phone number
   - Height of the structure
   - Impervious Surface & Stormwater worksheet

6. All properties within the Shoreland District with an impervious surface cover percentage over 15% will be required to submit a stormwater management plan pursuant to Article 11; Sec. 26-309 of the Land Use Ordinance.

7. After a complete application is submitted, an on-site inspection is conducted and the application is reviewed, a permit may be issued describing the proposed construction that may take place on the property.

8. The septic installer shall notify Crow Wing County Environmental Services a minimum of twenty-four (24) hours before the covering of any portion of the septic installation. Changes from the approved septic design will require approval by the county prior to construction.

I have read and fully understand the above information. The information provided in this application is true and correct.

_____ _____

Applicant Signature **Date**

When the application and all accompanying plans have been completed, please mail or deliver in person to the City of Crosslake Planning and Zoning Department, 37028 Co Rd 66, Crosslake, MN 56442. The appropriate fee must accompany all applications. Please make the check payable to the City of Crosslake.

COMMERCIAL & INDUSTRIAL LAND USE PERMIT APPLICATION

Receipt Number:_____ Permit Number:

Parcel Code: ___ ___ ___ ___ ___ ___ ___ ___

Property Owner:_____

Site Address: _____

City, State, Zip:_____

Mailing Address: _____

City, State, Zip:_____

Day Time Phone:_____ Cell Phone:_____

Email Address:_____

Date of Birth:_____

Legal Description:_____

Section:_____ Twp: 137 Rge: ☐ 27 / ☐ 28 Acres:_____

Lake/River:_____

Signature:_____

Authorized Agent:_____

Date:_____

☐ Commercial Structure

☐ New Structure
☐ Addition/Accessory Structure

Dimensions:_____

_____

_____

Other_____

Fee $_____

☐ Septic System

☐ Large Flow
☐ Small Flow
☐ Compliance Inspection

Fee $_____

Information Required for a Complete Application

- ☐ Performance Standards *Sec 26-282* (see attached)
- ☐ Site Plan with setbacks and Wetlands identified
- ☐ Contractor License Requirements Form
- ☐ Screening and Landscape plan
- ☐ Lighting plan
- ☐ Off street loading and parking
- ☐ Sign plan
- ☐ Storm water management plan
- ☐ Shoreline Rapid Assessment Model _____Buffer Required
- ☐ Waste disposal plan
- ☐ American Disability Act (ADA) Form

OFFICE USE ONLY

Received by:_____

Date:_____

Lake Classification:☐GD☐NE☐RD

Zoning:_____ Floodplain:_____

Septic:_____

Impervious Coverage:_____

Total Fees: $_____

Approved by:_____

Date_____

Comments:_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____

CONTRACTOR LICENSE REQUIREMENTS

Permit #_____

Property owners and authorized agents applying for "Land Use" and/or "Commercial & Industrial" Permits are required to acknowledge the following stating that as a homeowner/business owner they are aware of the requirements in Minnesota State Statute 326B.85 and are exempt from the requirements thereof:

- I understand that according to Minnesota State Statute 326B.85, the State of Minnesota requires that all residential building contractors, remodelers and roofers obtain a state license unless they qualify for a specific exemption from the licensing requirements. By signing this document, I attest to the fact that I am building or improving this house myself and I hereby claim to be exempt from the state licensing requirements because I am not in the business of building on speculation or for resale for the house for which I am applying for this permit.

Property owners and authorized agents:

_____ _____

Signature Owner Authorized Agent Date

_____ _____

Signature Owner Authorized Agent Date

Contractor Authorized Agent:

_____ _____

Company/Contractor Name License #

_____ _____

Signature Contractor Date

Note: This does not apply to applications for septic only "Land Use" Permits and "Shoreland/Land Alteration" Permits.

City of Crosslake
Accessibility Certification Form

Parcel Code: __ __ __ __ __ __ __ __

Property Owner: _____

Property Address: _____

Legal Description: _____

Accessibility Certification

This certification is to be signed by a Building Official or Accessibility Specialist licensed by the State of Minnesota.

I certify that the _____at the property location described above is in conformance with the Minnesota State Accessibility Code, Chapter 1341, Chapter 11 of the International Building Code, and ICC/ANSI A117.1.

Certifier's Name: _____

License No.:_____

Title & Company Name: _____

Address: _____

Telephone No.: _____

Email: _____

Signature: _____Date: _____

This form must be completed and returned to the:

City of Crosslake Planning & Zoning Department
Crosslake City Hall
13888 Daggett Bay Rd
Crosslake, MN 56442

If you have questions regarding the above, please call (218) 692-2689 or 2680 or email crosslakepz@crosslake.net

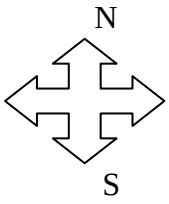
OFFICE USE ONLY

Received by: _____

Date: _____

Permit #: _____

Name_____ **SITE PLAN Parcel Code**__ __ __ __ __ __ __ __
Date _____ **SIGNATURE** _____



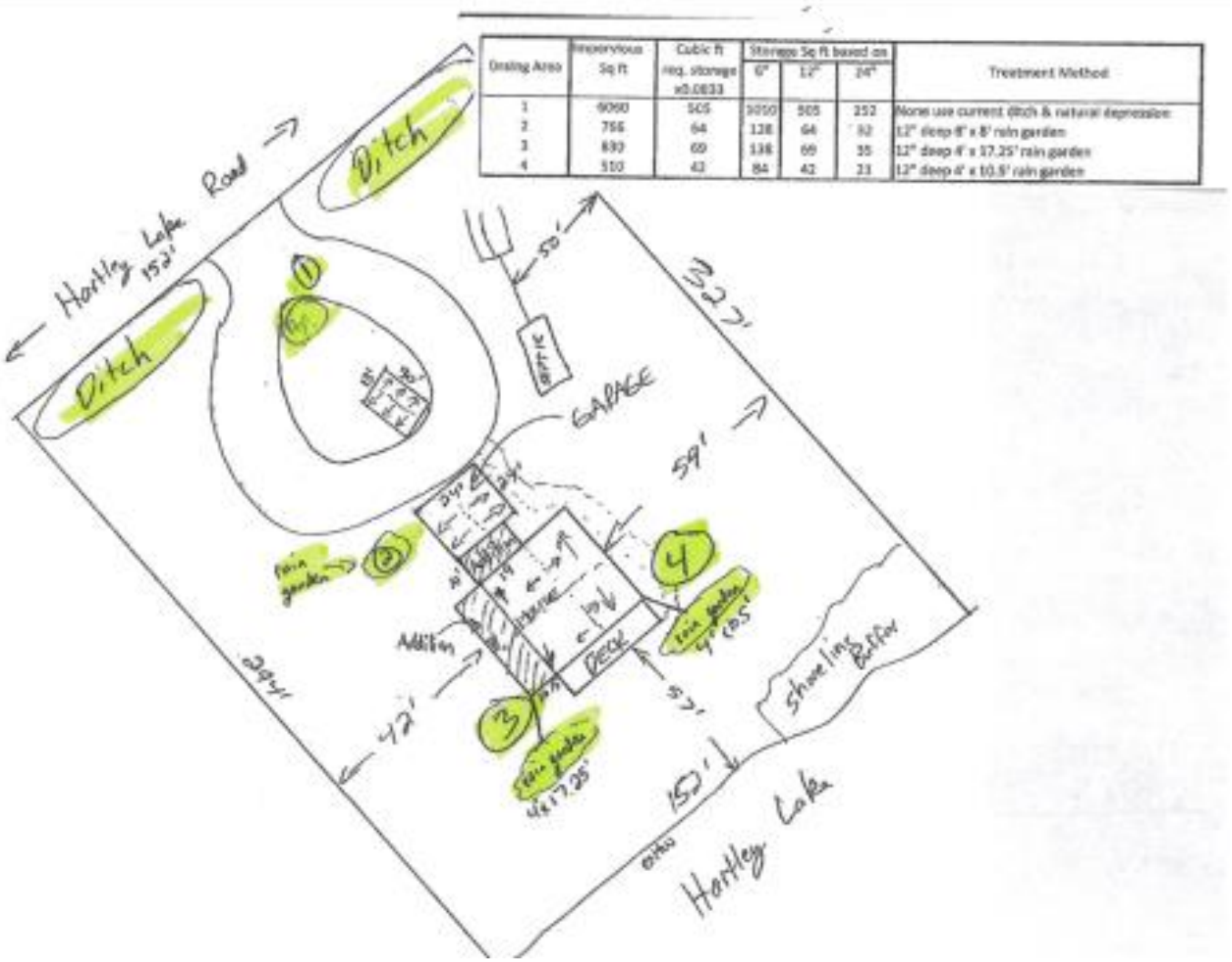
Please see reverse side for sample site plan and list of criteria required on the site plan.

Site Plan

The City of Crosslake Land Use Ordinance requires a site plan with the following information. Your assurance that these items are accurate and complete will aid in a quicker processing of your application. Environmental Services staff will review for the following items:

- ❑ North arrow correctly located
- ❑ Lot Width –accurate
- ❑ Lot Depth – accurate
- ❑ Acres or total square feet identified _____
- ❑ Lake or river name shown
- ❑ Wetlands identified
- ❑ Bluffs and steep slopes shown
- ❑ Ordinary High Water Mark (OHW) is identified
- ❑ Setback from property lines
- ❑ Setback from Road Right of Way *and* road name labeled
- ❑ Setback from Ordinary High Water Mark (OHW) of lakes and/or rivers
- ❑ Location of septic & well(s) showing setback from tank to dwelling or structure connected to
- ❑ Driveway and parking identified
- ❑ Dimensions of proposed structures including decks, porches, patios
- ❑ Dimensions of existing structures including decks, porches, patios
- ❑ Adequate ingress/egress shown (easement description if applicable)
- ❑ % of impervious surface (total square footage of existing and proposed structures and other impervious surfaces divided by total lot area) _____

EXAMPLE:



Drainage Area	Impervious Sq ft	Cubic ft req. storage x0.0833	Storage Sq ft based on 6"	12"	24"	Treatment Method
1	6060	505	1010	505	252	None use current ditch & natural depression
2	766	64	128	64	32	12" deep 8' x 8' rain garden
3	830	69	138	69	35	12" deep 4' x 17.25' rain garden
4	510	42	84	42	21	12" deep 4' x 10.5' rain garden

COMMERCIAL & INDUSTRIAL LAND USE PERMIT SUBMISSION REQUIREMENT CHECK LIST

Applicant:_____Date:_____

Property Owner(s):_____

Parcel ID: ___ ___ ___ ___ ___ ___ ___ ___

- ☐ Site plan
- ☐ All setbacks shown including septic
- ☐ Delineated wetlands identified and shown with Wetland Delineation Review and Submittal Form
- ☐ Landscaping and screening plan according to requirements in Article 28, Sec. 26-737 & Sec. 26-738
- ☐ Architectural drawings including appearance according to requirements in Article 29, Section 26-748
- ☐ Lighting Plan according to requirements in Article 28, Sec. 26-739
- ☐ Off street loading and parking according to requirements in Article 26
- ☐ Sign plan according to requirements in Article 33
- ☐ Storm water management plan according to requirements in Article 20, Sec. 26-549
- ☐ Waste disposal plan
- ☐ American Disability Act (ADA) Certificate – Applicable when there is public use

Received by_____ Date_____