

City of Osakis

14 Nokomis Street East ~ PO Box 486 ~ Osakis, MN 56360
Ph: (320) 859-2150 ~ FAX: (320) 859-3978

For Office Use Only	
DATE RCVD. _____	
TOTAL FEE	_____
DATE PAID	_____

Zoning Permit Application

Please Type or Print Legibly:

1. Site Address _____
2. Owner(s) _____ Daytime Phone _____
3. Owner's Address (if different from above) _____
4. Legal Description of Site: *(Please Attach Metes & Bounds Description on Separate Sheet)*
Note If unknown, please refer to property tax statement or ask Zoning Administrator*
Lot(s) _____ Block _____ Addition _____
5. Type of Zoning Request:
Awning: _____ Deck: _____ Fence: _____ Landscapping: _____ Shed: _____ Sign: _____
6. **Awning** (size & description): _____
7. **Deck** (under 3 feet in height) (size & description): _____
8. **Fence** (size & description)(setback is 3 feet): _____
9. **Landscapping** (describe work to be done): _____

10. **Shed** (under 200 sq. ft) (size & description): _____
(sheds shall not be closer than 5 feet to the principal structure)
11. **Sign** (size & description): _____
12. Estimated Cost of Project *(Including Materials & Labor)*: \$ _____
13. Approximate Start Date _____

Additional Information Required on Reverse

- _____ Site plan (8 1/2"x 11") drawn to scale, showing actual size and shape of parcel with proposed project plans.
- _____ All existing signs on property and their respective locations with dimensions, setbacks, & height.
(Include window signs)
- _____ Specifications for proposed sign(s).
- _____ Location of all structures and the square footage of those structures.
- _____ Public right-of-ways, sidewalks, curb cuts, driveways, parking, access roads, easements, & etc.
- _____ Landscapping plans.
- _____ Drainage plans.
- _____ Other information: _____

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of Laws and Ordinances governing this type of work will be complied with whether specified herein or not. I have identified all property boundaries, easements, flood zones and/or wetlands existing on the property on my survey and application. The undersigned further agrees the City and its' administrative staff relied on the accurateness of this application, plans and specifications relative to this project and holds the city of Osakis, and its employees harmless from all liability arising from the granting of this permit.

AUTHORIZED SIGNATURE OF OWNER OR BUILDER

ZONING ADMINISTRATOR

This Permit Expires One Year From: _____