

CITY OF OSAKIS

14 Nokomis Street East PO Box 486 Osakis, MN 56360

Phone: (320) 859-2150 FAX: (320) 859-3978 cityhall@cityofosakis.com

For Offic	ce Use	Only
DATE RCVD.		
Permit Fee	\$	30.00
DATE PAID		

Zoning Permit Application

1. Site Address:	
2. Owner(s):	Phone:
3. Owner's Address	s: (if different from above)
4. AWNING (size &	description):
5. DECK (under 30	inches in height)(size & description):
6. FENCE (under 6	ft high)(3 ft setback)(size & description):
7. LANDSCAPPING	(describe work to be done):
8. GRADING & FIL	ING in the Shoreland Management District (the movement of more than
ten (10) cubic ya	ards of material on steep slopes or within shore or bluff impact zones)
(describe work	to be done & total cubic yards of material):
9. SHED (under 200	O sq ft)(size & description):
(No structure sh	nall be constructed in the front yard & shall not be closer than 5 feet to the
principal structu	re. Side yard setback is 10 feet. Rear yard setback is 5 feet.
Osakis Propertie	es - shed cannot be larger than 160 sq. ft. See covenantes for more information.
10. SIGN (size & de	escription):
11. Estimated Cost	of Project (Including Materials & Labor):
12. Approximate S	tart Date:

The following information is required when submitting your application:		
SITE PLAN (drawn to scale) WITH ALL LOT AREA AND SETBACK REQUIREMENTS MET.		
SPECIFICATIONS FOR PROPOSED SIGN(S).		
LANDSCAPPING PLANS.		
DRAINAGE PLANS.		
OTHER INFORMATION REGARDING YOUR PROPOSED PROJECT:		
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 Permit expires one year from this date		
ZONING STAFF		