

Goodhue County Land Use Permit Application Land Use Management

| Permit # | Staff Use Only |
|----------|----------------|
| Date | |

| Landown | er Infor | mation | | | | | | |
|--|---|--------------|-------------------|-------------------|-------|---------|-------------------------|--|
| Name | | | | | | | | |
| Mailing Addr | ress | | | | | | | |
| Owner Phone | 9 | | | Email | | | | |
| Applicant | Inform | ation | | | | | | |
| Landowner's | Name | | | | | | | |
| Mailing Addr | ress | | | | | | | |
| Contact Phon | ie | | | Email | | | | |
| Project In | ıformati | on | | | | | | |
| Parcel Numb | Parcel Number(s) | | | | | | | |
| Detailed narr | Detailed narrative of project requiring a Land Use Permit | | | | | | | |
| Start Date | | | | End Date | | | | |
| Required | Submitt | tale | | | | | | |
| | | Signed Appli | cation | | | | | |
| Site I | | | | | | | | |
| Additional information as corresponds to request | | | | | | | | |
| All necessary state and federal permits | | | | | | | | |
| Fees paid in full Landowner Signature | | | | | | | | |
| - Landowner Signature | | | | | | | | |
| Applicant Sig | nature | | | | | | | |
| | | | (| County Use |) | | | |
| Application F | i'ee | \$50 | Receipt Number | | | | Received Date | |
| Request comp | plies with G | oodhue Cou | | g and Subdivi | ision | require | ments as attested by me | |
| the Goodhue County Planner/Zoning Administrator | | | | | | | | |
| DATE: | | | | | | | | |
| Conditions: | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

GOODHUE COUNTY LAND USE PERMIT APPLICATION

PROJECT SUMMARY

Please provide answers to the following questions in the spaces below. If additional space is needed, you may provide an attached document.

| 1. | Description of purpose and planned scope of operations (including retail/wholesale activities). |
|------------|--|
| 2. — | Planned use of existing buildings and proposed new structures associated with the proposal. |
| 3. | Proposed number of non-resident employees. |
| 4 . | Proposed hours of operation (time of day, days of the week, time of year) including special events not within the normal operating schedule. |
| 5. — | Planned maximum capacity/occupancy. |
| 6. | Traffic generation and congestion, loading and unloading areas, and site access. |
| 7. | Off-street parking provisions (number of spaces, location, and surface materials). |
| 8. | Proposed solid waste disposal provisions. |
| 9. | Proposed sanitary sewage disposal systems, potable water systems, and utility services. |
| | |



| 10. Existing and proposed exterior lighting. |
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| 11. Existing and proposed exterior signage. |
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| 12. Existing and proposed exterior storage. |
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| 13. Proposed safety and security measures. |
| |
| 14. Adequacy of accessibility for emergency services to the site. |
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| 15. Potential for generation of noise, odor, or dust and proposed mitigation measures. |
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| 16. Anticipated landscaping, grading, excavation, filling, and vegetation removal activities. |
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| 17. Existing and proposed surface-water drainage provisions. |
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| 18. Description of food and liquor preparation, serving, and handling provisions. |
| |
| 19. Provide any other such information you feel is essential to the review of your proposal. |
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