

Traverse County
Land Use Management
PO Box 487
Wheaton, MN 56296
320-759-1560

TRAVERSE COUNTY AG LAND USE APPLICATION FORM

Please Attach Map & Site Sketch

| | |
|--------------------|-------|
| Application #: | |
| Date App Received: | |
| Parcel #: | |
| Fee Paid: \$ | Date: |

| | | | |
|---|------------------|--|----------------------------|
| Property Owner's Name: | | Parcel # (from prop. tax stmt): | |
| Owner's Address (Street, City, State, Zip Code): | | | |
| Property Address (Only If Different): | | | |
| Authorized Agent (If Applicable): | | (Statement of Authorization Required.) | |
| Preferred Phone: | Secondary Phone: | Email: | |
| Legal Description: Township Name, Lot & Block Numbers | | Section | Township # Range # Quarter |

| Type of Project | Proposed Use | Water Supply |
|---|---|---|
| <input type="checkbox"/> New Construction | <input type="checkbox"/> Single Family Residential | <input type="checkbox"/> Public |
| <input type="checkbox"/> Addition | <input type="checkbox"/> Multiple Family Residential | <input type="checkbox"/> Community Well |
| <input type="checkbox"/> Relocation | No. of Units: _____ | <input type="checkbox"/> Private Well |
| <input type="checkbox"/> Replacement | <input type="checkbox"/> Agricultural | Sewage Treatment |
| <input type="checkbox"/> Other _____ | <input type="checkbox"/> Machine Shed <input type="checkbox"/> Animals/Feedlot <input type="checkbox"/> Other | <input type="checkbox"/> Public |
| | <input type="checkbox"/> Commercial/Industrial | <input type="checkbox"/> Community |
| | <input type="checkbox"/> Other _____ | <input type="checkbox"/> Individual _____ |

| Structure Type | Construction | Dimensions | Project Cost Estimate |
|--|---|--|--------------------------|
| <input type="checkbox"/> Residence | <input type="checkbox"/> Wood Frame | Length _____ | Materials \$ _____ |
| <input type="checkbox"/> Garage | <input type="checkbox"/> Steel/Metal | Width _____ | Labor \$ _____ |
| <input type="checkbox"/> Agricultural Building | <input type="checkbox"/> Masonry | Height _____ | Total \$ _____ |
| <input type="checkbox"/> Storage | <input type="checkbox"/> Pole Building | Stories above ground _____ | |
| <input type="checkbox"/> Deck | <input type="checkbox"/> Pre-Fabricated | Basement: <input type="checkbox"/> Yes <input type="checkbox"/> No | Proposed Starting |
| <input type="checkbox"/> Office | <input type="checkbox"/> Other _____ | Bedrooms _____ | Date _____ |
| <input type="checkbox"/> Grain Bin # bushels _____ | | Baths _____ | |
| <input type="checkbox"/> Other _____ | | Other _____ | |

| Lot Characteristics | |
|--|--------------------------------------|
| Building Setback from Street/Road _____ ft.; | Setback from State Highway _____ ft. |
| Distance from Building to Septic Tank _____ ft.; | Distance to Drain Field _____ ft. |
| Total Lot Area _____ acres or ft. ² | Distance to Well _____ ft. |

| | |
|---|-------------------|
| Owner or Agent Signature _____ | Date _____ |
| I hereby certify that all information above is true and correct to the best of my knowledge. I agree to complete the proposed work in accordance with the description within this application, any addendum forms, plans, specifications, and all other supporting data as described. | |
| Please Attach Map & Site Sketch | |
| APPLICATION IS HEREBY <input type="checkbox"/> DENIED (SEE FINDINGS) <input type="checkbox"/> APPROVED (PERMIT GRANTED) | |
| BY ORDER OF: _____ Traverse County Official, Dated: _____ | |
| This permit will expire one year from the date of approval unless otherwise noted through an extension by the above authority. | |

Revised 7/11/2023

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TRAVERSE COUNTY - STATEMENT OF AUTHORIZATION

| | | |
|---|--------------------------------|------------------------|
| Property Owner's Name: | | |
| Authorized Agent's Name: | Business Name (if Applicable): | |
| Agent's Address (Street, City, State, Zip Code): | | |
| Agent's Preferred Phone: | Agent's Secondary Phone: | Agent's Email Address: |
| I hereby authorize _____ to act on my behalf as my agent in the processing of this application and to furnish, upon request, supplemental information in support of this permit application. | | |
| Owner's Signature: _____ Date: _____ | | |

Revised: July 11, 2023

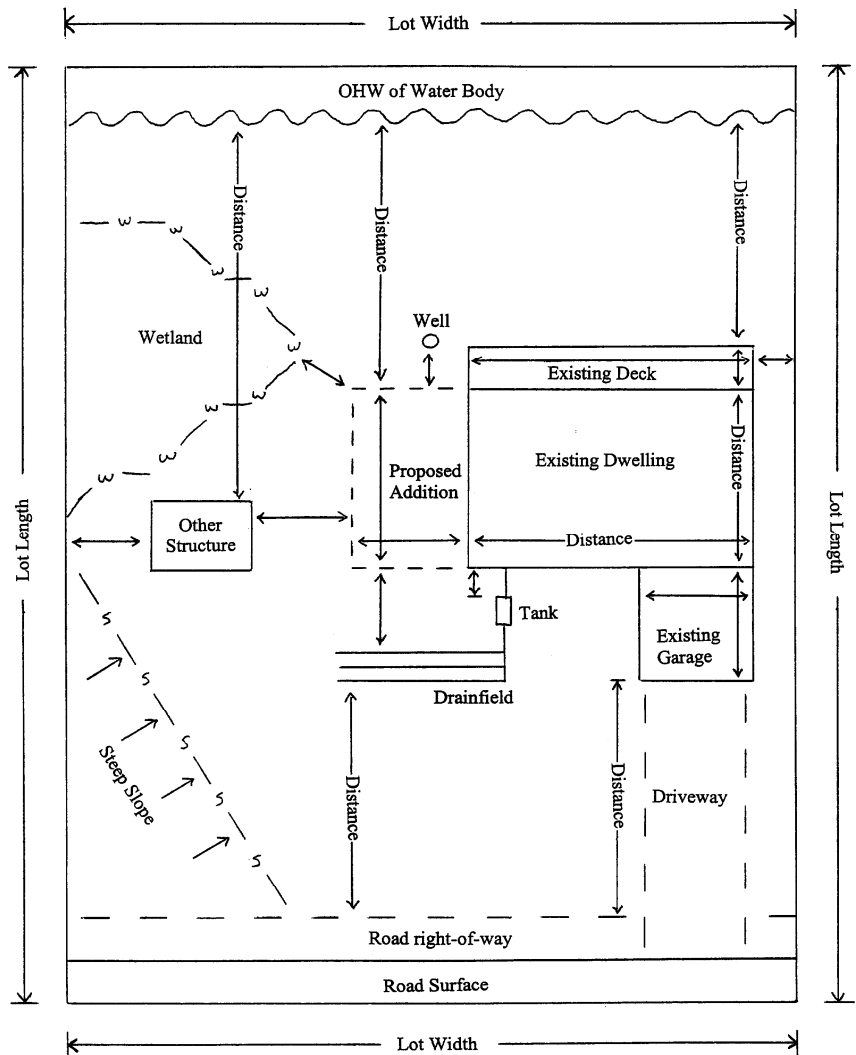
SKETCH DRAWING INSTRUCTIONS

A sketch of your site plan is a required part of the permit application. Please attach sketch on a separate sheet of paper or draw sketch on a printed map with aerial imagery i.e. an online mapping service (i.e. Google, Bing, etc.) or from the Traverse County GIS website: <https://traversecountymn.maps.arcgis.com/home/index.html>.

EXAMPLE SKETCH:

Required Information:

- ✚ North arrow
- ✚ Lot dimensions and size
- ✚ Waterbodies and wetlands
- ✚ Roads, right-of-ways, driveways and parking areas
- ✚ Existing Easements
- ✚ Existing structures, with outside wall dimensions
- ✚ Proposed structures, with outside wall dimensions
- ✚ All impervious (i.e. hard surfaced) structures not already identified (i.e. driveways, decks, patios, sidewalks, retaining walls, areas underlain with landscape fabric, etc...). Show dimensions.
- ✚ Well and septic system location, if applicable
- ✚ Bluff (>30% slope) or steep slopes (12-30%) and direction of slope, if applicable
- ✚ Setback distances from existing and proposed structures to lot lines, waterbodies, any part of a bluff, private sewers, wells, and road centerline.
- ✚ Other information that may be necessary or required by the Zoning Administrator to describe your proposed improvement. These may include:
 - ☐ Elevation of Ordinary High Water Level (OHW)
 - ☐ Elevation of dwelling and/or lowest floor
 - ☐ Elevation of Highest Known Water Level (HKWL)
 - ☐ Bluff determination / Slope information (elevation contours)
 - ☐ 100-year Floodplain Elevation
 - ☐ Professionally surveyed of all impervious surfaces
 - ☐ Professionally delineated wetland boundaries



REQUIRED LOT SURVEYS: The Zoning Administrator will determine whether you are required to submit a property or line survey. Generally, if it is unclear whether you will meet a required setback, impervious surface limits, floodplain elevation requirements or some other requirement of the ordinance related to the boundaries or physical aspects of a property, a certificate of survey will be required. If you already have had a survey completed, please submit a copy as part of your application to determine whether it is sufficient to avoid the need for another survey.

SKETCH DRAWING



Impervious Surface Calculation (only necessary if your property is in a shoreland zone – within 1000 ft of a lake or 300 ft of a river)

| <u>List all existing structures* or other improvements on the property and their outside dimensions</u> | | <u>List all proposed structures* or other improvements on the property and their outside dimensions:</u> | |
|--|---------------------------------|---|---------------------------------|
| Type of Structure or Improvement | Footprint – incl. eaves (sq ft) | Type of Structure or Improvement | Footprint – incl. eaves (sq ft) |
| 1. | | | |
| 2. | | | |
| 3. | | | |
| 4. | | | |
| 5. | | | |
| Total | | Total | |

***Note:** Include all roofed structures (including eaves), patios, decks, driveways, parking areas, retaining walls, stairways, sidewalks, propane tanks, landscaping underlain with plastic, etc.

Total Lot Size = _____ sq ft or acres

Total Impervious Coverage (Total Impervious / Total Lot Size) * 100 = _____%