



APPLICATION FOR DEVELOPMENT REVIEW

Submittal Date: 1/1/21 PC Date: 2/2/21 CC Date: 2/22/21 60-Day Review Date: 3/1/21

Section 1: Application Type (check all that apply)

(Refer to the appropriate Application Checklist for required submittal information that must accompany this application)

- Comprehensive Plan Amendment.....\$600
 - Minor MUSA line for failing on-site sewers \$100
 - Conditional Use Permit (CUP)
 - Single-Family Residence \$325
 - All Others..... \$425
 - Interim Use Permit (IUP)
 - In conjunction with Single-Family Residence.. \$325
 - All Others..... \$425
 - Rezoning (REZ)
 - Planned Unit Development (PUD) \$750
 - Minor Amendment to existing PUD..... \$100
 - All Others..... \$500
 - Sign Plan Review..... \$150
 - Site Plan Review (SPR)
 - Administrative..... \$100
 - Commercial/Industrial Districts* \$500
 Plus \$10 per 1,000 square feet of building area:
 (_____ thousand square feet)
 *Include number of existing employees: _____
 *Include number of new employees: _____
 - Residential Districts..... \$500
 Plus \$5 per dwelling unit (_____ units)
 - Notification Sign (City to install and remove) \$200
 - Property Owners' List within 500' (City to generate after pre-application meeting) \$3 per address
 (14 addresses)
 - Escrow for Recording Documents (check all that apply)..... \$50 per document

<input type="checkbox"/> Conditional Use Permit	<input type="checkbox"/> Interim Use Permit	<input type="checkbox"/> Site Plan Agreement
<input type="checkbox"/> Vacation	<input checked="" type="checkbox"/> Variance	<input type="checkbox"/> Wetland Alteration Permit
<input type="checkbox"/> Metes & Bounds Subdivision (3 docs.)	<input type="checkbox"/> Easements (_____ easements)	<input type="checkbox"/> Deeds
 - Subdivision (SUB)
 - Create 3 lots or less \$300
 - Create over 3 lots \$600 + \$15 per lot
 (_____ lots)
 - Metes & Bounds (2 lots)..... \$300
 - Consolidate Lots..... \$150
 - Lot Line Adjustment..... \$150
 - Final Plat..... \$700
 (Includes \$450 escrow for attorney costs)*
 *Additional escrow may be required for other applications through the development contract.
 - Vacation of Easements/Right-of-way (VAC)..... \$300
 (Additional recording fees may apply)
 - Variance (VAR) \$200
 - Wetland Alteration Permit (WAP)
 - Single-Family Residence..... \$150
 - All Others..... \$275
 - Zoning Appeal..... \$100
 - Zoning Ordinance Amendment (ZOA)..... \$500
- NOTE: When multiple applications are processed concurrently, the appropriate fee shall be charged for each application.**
- TOTAL FEE: 492.00**

Section 2: Required Information

Description of Proposal: See Attached

Property Address or Location: 10151 Great Plains Blvd

Parcel #: _____ Legal Description: See Attached

Total Acreage: _____ Wetlands Present? Yes No

Present Zoning: Select One AZ Requested Zoning: Select One NA

Present Land Use Designation: Select One Low Density Residential Requested Land Use Designation: Select One NA

Existing Use of Property: Single Family Residential

Check box if separate narrative is attached.

**CITY OF CHANHASSEN
 RECEIVED
 DEC 31 2020**

Section 3: Property Owner and Applicant Information

APPLICANT OTHER THAN PROPERTY OWNER: In signing this application, I, as applicant, represent to have obtained authorization from the property owner to file this application. I agree to be bound by conditions of approval, subject only to the right to object at the hearings on the application or during the appeal period. If this application has not been signed by the property owner, I have attached separate documentation of full legal capacity to file the application. This application should be processed in my name and I am the party whom the City should contact regarding any matter pertaining to this application. I will keep myself informed of the deadlines for submission of material and the progress of this application. I further understand that additional fees may be charged for consulting fees, feasibility studies, etc. with an estimate prior to any authorization to proceed with the study. I certify that the information and exhibits submitted are true and correct.

Name: Ed Myslivecek Contact: same
Address: 10151 GREAT PLAINS BLVD Phone: 612 251 4064
City/State/Zip: CHASKA MN 55318 Cell:
Email: edmyslivecek@gmail.com Fax:
Signature: [Signature] Date: 1/7/21

PROPERTY OWNER: In signing this application, I, as property owner, have full legal capacity to, and hereby do, authorize the filing of this application. I understand that conditions of approval are binding and agree to be bound by those conditions, subject only to the right to object at the hearings or during the appeal periods. I will keep myself informed of the deadlines for submission of material and the progress of this application. I further understand that additional fees may be charged for consulting fees, feasibility studies, etc. with an estimate prior to any authorization to proceed with the study. I certify that the information and exhibits submitted are true and correct.

Name: SAME Contact:
Address: Phone:
City/State/Zip: Cell:
Email: Fax:
Signature: Date:

This application must be completed in full and must be accompanied by all information and plans required by applicable City Ordinance provisions. Before filing this application, refer to the appropriate Application Checklist and confer with the Planning Department to determine the specific ordinance and applicable procedural requirements and fees.

A determination of completeness of the application shall be made within 15 business days of application submittal. A written notice of application deficiencies shall be mailed to the applicant within 15 business days of application.

PROJECT ENGINEER (if applicable)

Name: SAME Contact:
Address: Phone:
City/State/Zip: Cell:
Email: Fax:

Section 4: Notification Information

Who should receive copies of staff reports?

- Property Owner Via: [checked] Email [] Mailed Paper Copy
Applicant Via: [] Email [] Mailed Paper Copy
Engineer Via: [] Email [] Mailed Paper Copy
Other* Via: [] Email [] Mailed Paper Copy

*Other Contact Information:

Name:
Address:
City/State/Zip:
Email:

INSTRUCTIONS TO APPLICANT: Complete all necessary form fields, then select SAVE FORM to save a copy to your device. PRINT FORM and deliver to city along with required documents and payment. SUBMIT FORM to send a digital copy to the city for processing.

SAVE FORM

PRINT FORM

SUBMIT FORM