

CROW WING TOWNSHIP  
**LOT SPLIT/SUBDIVISION/REZONING APPLICATION**

**APPLICATION:**

- A. Applicant shall complete Subdivision/Rezoning Application and submit to Township Planner.
- B. Preliminary Plat applications shall be completed at least to the minimum standards of the Ordinance.
- C. Final Plat applications shall be completed as per the requirements of the Township Board from the Preliminary Plat Hearing and the minimum standards of the Ordinance, Crow Wing County and the State of Minnesota.
- D. Submittals for Metes and Bounds Subdivisions (lot splits) shall conform to the minimum requirements of a preliminary plat if either the proposed new parcel or the remnant is less than 10 acres. A survey, showing topography, of both lots must be submitted.
- E. If any of the parcels contain structures with an ISTS, a Sewer Compliance Inspection must be submitted.
- F. Applicants shall submit 9 copies of the proposed subdivision on 11x17 size paper and at least 1 copy of the proposed subdivision on plat size paper.**
- G. All applications must be submitted **30 days** prior to the Planning and Zoning meeting in which applicant wishes to be heard.
- H. The Township Planner shall, based on submittals, compute the subdivision permit fee. This fee shall be paid by the applicant at the time of application.

**REVIEW:**

- A. The Township Planner shall review the application for completeness and assign a reference number to application, plans, and any other attachments. Applicant will be notified where additional information is needed.
- B. After receipt of a completed Subdivision Application and supporting documents, the Township Planner shall schedule a public hearing date on the Planning Commission's agenda for the earliest possible opening. Applicant will be notified by mail of the date and time of the public hearing.
- C. Township Planner will prepare a Staff Report on the application. The Staff Report will be available for public review at Town Hall and online at [www.njpa.org/crowwingtownship](http://www.njpa.org/crowwingtownship) typically one week prior to the scheduled meeting date.
- D. The Township Fee Schedule is based on average processing and review costs for all applications. When costs exceed the original application fees, the applicant shall reimburse the Township for any additional costs. Such expenses may include, but are not limited to, payroll, mailing costs, consultant fees and other professional services the Township may need to obtain in reviewing permits. The Township may withhold final action on any application and/or hold the release of such permits until all fees are paid.

**ACTION:**

- A. The Planning Commission shall hold a public hearing on the application.
- B. At the conclusion of the public hearing, and after consideration of the testimony presented, the Planning Commission shall make a recommendation to the Town Board.
- C. The Town Board shall consider the Planning Commission's recommendation at the next scheduled Board meeting.

|                       |
|-----------------------|
| APP # _____           |
| Date _____            |
| Fee _____             |
| (for office use only) |

**CROW WING TOWNSHIP**  
**LOT SPLIT/SUBDIVISION/REZONING APPLICATION**

Name of Applicant \_\_\_\_\_ Phone \_\_\_\_\_

Property Address (E911#) \_\_\_\_\_ Local Phone \_\_\_\_\_

Mailing Address \_\_\_\_\_ E-mail \_\_\_\_\_  
*(if different than above)*

City, State, Zip \_\_\_\_\_

|                |                          |   |
|----------------|--------------------------|---|
| Applicant is:  |                          | Title Holder of Property <i>(if other than applicant)</i> |
| Legal Owner    | <input type="checkbox"/> | _____   |
| Contract Buyer | <input type="checkbox"/> | (Name) _____  |
| Option Holder  | <input type="checkbox"/> | _____   |
| Agent          | <input type="checkbox"/> | (Address) _____   |
| Other _____    |                          | _____   |
|                |                          | (City, State, Zip)  |

Signature of Owner, authorizing application (required): \_\_\_\_\_  
 By signing the owner is certifying that they have read and understood the instructions accompanying this application.)

Signature of Applicant (if different than owner): \_\_\_\_\_  
 (By signing the applicant is certifying that they have read and understood the instructions accompanying this application.)

Location of property involved in this request:  
 \_\_\_\_\_  
 \_\_\_\_\_

Property ID # \_\_\_\_\_ Zoning District \_\_\_\_\_  
 (8 digit # on tax statement)

Nature of request (select only one):

- Preliminary Plat(  )
- Final Plat  ( )
- Metes and Bounds  ( )
- Rezoning  ( ) Proposed New Zoning District \_\_\_\_\_

**Note: Applicants may apply for Preliminary Plat and Final Plat at the same time, but they must be on separate applications. Preliminary Plat and Final Plat hearings will not be held at the same meeting. Effective date of Final Plat application will be the date of Preliminary Plat approval.**

## **CHECKLIST**

- \_\_\_\_\_ Completed application, signed by property owner
- \_\_\_\_\_ Fee
- \_\_\_\_\_ Sewer Compliance Inspection Report
- \_\_\_\_\_ All current Township charges paid
- \_\_\_\_\_ Survey
- \_\_\_\_\_ Site plan with the minimum information outlined in the Ordinance (unless waived by Township Planner):

## **CONTACT INFORMATION**

Community Development  
Administrator:

Amanda Peterson  
Sourcewell  
202m12th St NE  
Staples, MN 56479  
Phone: (218) 895-4138  
[amanda.peterson@sourcewell-mn.gov](mailto:amanda.peterson@sourcewell-mn.gov)