



APPLICATION FOR ZONING COMPLIANCE

PROPERTY OWNER: _____

PROPERTY ADDRESS: _____

LEGAL DESCRIPTION: _____

TELEPHONE NUMBERS: _____

PROPOSED PROJECT DESCRIPTION: _____

DIMENSIONS: _____ TOTAL SQUARE FEET: _____

PROPOSED SETBACKS: front:_____rear:_____side:_____side:_____

IF APPLICABLE: Number of Accessory Buildings on Property: _____ and Total Square Footage: _____

IMPERVIOUS SURFACE:	Current:	Proposed:
HOUSE	_____	_____
GARAGE	_____	_____
DECK(S)	_____	_____
DRIVEWAY	_____	_____
SHED(S)	_____	_____
PATIO(S)	_____	_____
WALKWAY(S)	_____	_____
OTHER	_____	_____
TOTAL	_____	_____

OWNER/APPLICANT SIGNATURE: _____ DATE: _____

For City Use Only

The above described property is zoned _____ and is intended for the following use: residential/business (circle one)

Required setbacks: Principal or Accessory Structures: Front _____ Back _____ Side _____ Side _____

Principal Structure Sq footage minimum: _____ Accessory Structures sq footage allowed _____ # allowed _____

Impervious Surface Percent (Shoreland District, 25% allowed; non-Shoreland District, 50% allowed): _____

Tree Preservation Plan Provided _____

Additional notes/restrictions: _____

Finance Review:

Assessments _____ Park Dedication _____ Outstanding Legal/Eng. Fees _____

WAC _____ SAC _____ Water meter _____ Escrow _____

This is to certify that the above described project: (check one)

- ☐ Is allowed under the City Zoning Ordinance and does not need any further approval by the City of Lindstrom.
A building permit for the above described project may be issued.
- ☐ Survey/variance/conditional use permit (circle one) required prior to City Approval.
- ☐ Under the City Zoning Ordinance is allowed with the attached variance approval; or with the attached conditional use permit and must follow the conditions as ordered by the Lindstrom City Council. Those conditions are (attach conditions per Council approval:

Additional comments: _____

Lindstrom City Administrator

Date: _____