



**City of Farmington**  
 430 Third Street  
 Farmington, Minnesota  
 651.280.6800 • Fax 651.280.6899  
 www.ci.farmington.mn.us

**INTERIM USE PERMIT APPLICATION**

**Applicant:** \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_  
 Street City State Zip Code

**Owner:** \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_  
 Street City State Zip Code

**Premises Involved:** \_\_\_\_\_  
 Address/Legal Description (lot, block, plat name, section, township, range)

Current Zoning District \_\_\_\_\_ Current Land Use \_\_\_\_\_

**Specific Nature of Request:** \_\_\_\_\_

**SUBMITTAL REQUIREMENTS**

- Proof of Ownership
- Application Fee
- Boundary / Lot Survey
- 6 Copies of Site Plan
- Abstract/Residential List (required 350' from subject property)
- Torrens (Owner's Duplicate Certificate of Title **Required**)

\_\_\_\_\_  
**Signature of Owner** **Date** **Signature of Applicant** **Date**

Request Submitted to Planning staff on _____	<b>For office use only</b>
Public Hearing Set for: _____	Advertised in Local Newspaper: _____
Planning Commission Action: _____ Approved _____ Denied	Fee Paid _____
City Council Action (if necessary): _____ Approved _____ Denied	\$200 – City of Farmington \$46 – Dakota County Recorder
Comments: _____	
Termination: _____	
Planning division: _____	Date: _____ 9/06