



430 Third St., Farmington, MN 55024  
651-280-6800  
FarmingtonMN.gov

PETITION FOR COMPREHENSIVE PLAN AMENDMENT

Applicant: \_\_\_\_\_ Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

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

Owner: \_\_\_\_\_ Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

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

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

Current Comprehensive Plan Designation: \_\_\_\_\_

Proposed Comprehensive Plan Designation: \_\_\_\_\_

I understand that a public hearing is required as well as a published notice of hearing, for which I hereby attach payment of the fee in the amount of \$\_\_\_\_\_, which I understand further will be refunded if no meeting is scheduled.

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Date

Request Submitted to Planning staff on \_\_\_\_\_ For office use only  
Public Hearing Set for: \_\_\_\_\_ Advertised in Local Newspaper: \_\_\_\_\_  
Planning Commission Action: \_\_\_\_\_ Approved \_\_\_\_\_ Denied  
City Council Action (if necessary): \_\_\_\_\_ Approved \_\_\_\_\_ Denied  
Comments:  
\_\_\_\_\_  
\_\_\_\_\_  
Conditions Set:  
\_\_\_\_\_  
\_\_\_\_\_  
Planning division: \_\_\_\_\_ Date: \_\_\_\_\_  
In accordance with Title 10, Chapter 3, Section 12 of the City Code. 9/19