



ZONING PERMIT APPLICATION

TOWN OF GNESEN – 6356 HOWARD GNESEN ROAD - DULUTH, MN 55803 - 218-721-3158

Today's Date:		Permit #:	
PROPERTY OWNER INFORMATION			
Owner's Name:		Parcel #:	
Site Address:		Owner's Address:	
E-mail address:	Home Phone #:	Cell Phone #:	
APPLICANT INFORMATION OR CONTRACTOR INFORMATION – IF DIFFERENT FROM ABOVE			
Applicant/Contractor name:		Applicant is: <input type="checkbox"/> Contractor <input type="checkbox"/> Owner's Agent Contractor's license #:	
Address:		City:	State: Zip:
E-mail address:		Applicant Phone #:	
SITE INFORMATION – PLEASE ATTACH SITE SKETCH			
Lot Area: _____ Acres Project Size: _____ Sq. ft Yards of fill: _____ Cu. Yds.			
Leased property? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, do you have written Authorization from the property owner? (attach)			
How is the property accessed? <input type="checkbox"/> Public Road <input type="checkbox"/> Private Road <input type="checkbox"/> Easement <input type="checkbox"/> Water <input type="checkbox"/> Other			
PROJECT INFORMATION			
Description of proposed work: _____			
Is this project within 300 feet of a stream/river or 1,000 feet of a lake? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Is this project adding a bedroom? <input type="checkbox"/> Yes <input type="checkbox"/> No Total # of bedrooms after project completion: _____			
Does this project include plumbing or pressurized water in proposed structure? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If you answered "yes" to any of the questions above, you must attach a copy of the septic permit. <input type="checkbox"/>			
I do hereby make application for a zoning permit. The application and accompanying documents are complete and accurate. Work shall be consistent with the plans and information provided with the permit application and shall comply with applicable codes, ordinances, and laws and conditions of approval. Work shall not begin until a zoning permit has been issued. The application has one year to show substantial progress or provide an explanation/reasoning for no forward progress deemed acceptable by Zoning Officer. An extension and/or new zoning permit may be required by the Zoning Officer after one year has elapsed from the original application.			
_____ Applicant's signature		_____ Date	

Office Use:

Zone District: _____

Lake/River Name: _____

Zoning Official: _____

Fee paid: Yes

Date issued: _____

Revision Date: 02/19/2024

ZONING PERMIT WORKSHEET

TOWN OF GNESEN, MINNESOTA

WHAT ARE YOU APPLYING FOR: CHECK ALL THAT APPLY TO THE PROJECT. MAKE CHECKS PAYABLE TO: TOWN OF GNESEN

<p>New Buildings: \$300.00</p> <p><input type="checkbox"/> Dwelling – <i>Home, Mobile Home, Hunting Shack, or Cabin (Includes attached garage and deck, if applicable)</i></p> <p><input type="checkbox"/> Replacement of Existing Dwelling – <i>Home, Mobile Home, Hunting Shack, or Cabin</i></p> <p>Will the old dwelling be removed from the property? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><i>If yes, an affidavit must be filled out stating when the old dwelling will be removed.</i></p> <p><input type="checkbox"/> Accessory Dwelling – <i>Guest cottage or bunkhouse. Must follow Performance Standards.</i></p>	<p>Other Construction: \$200.00</p> <p><input type="checkbox"/> Additions to dwelling</p> <p style="margin-left: 20px;">Is the dwelling located on a lake or river?</p> <p style="margin-left: 40px;"><input type="checkbox"/> Yes <input type="checkbox"/> No If yes, does the structure meet the required shoreline setback? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, a variance may be required.</p> <p><input type="checkbox"/> Additions to accessory structure</p>	<p>Commercial/Industrial: \$400.00</p> <p><input type="checkbox"/> Commercial structure</p> <p><input type="checkbox"/> Commercial alteration</p> <p><input type="checkbox"/> Industrial structure</p> <p><input type="checkbox"/> Industrial alteration</p>
<p>New Buildings:</p> <p><input type="checkbox"/> Accessory Structure \$150.00– <i>Garage, Pole Building, Shed, Sauna, Screenhouse or Gazebo that either meets shoreland setback or not located in a shoreland area.</i></p> <p><input type="checkbox"/> Water-oriented Accessory Structure \$300.00 – <i>Boathouse, Sauna, Screenhouse/gazebo on a lake or river located at reduced shoreline setback. Must follow Performance Standards.</i></p>	<p>Other Construction/Change in Use: \$100.00</p> <p><input type="checkbox"/> New deck or deck replacement</p> <p><input type="checkbox"/> Land alteration</p> <p><input type="checkbox"/> Change in use Explain the current and proposed use. Current:</p> <p style="margin-left: 20px;">Proposed:</p>	<p>Misc:</p> <p><input type="checkbox"/> Outdoor signs \$50.00 (Must follow Performance Standards. Dynamic signs require a CUP)</p> <p><input type="checkbox"/> Special Use Permit \$40.00</p> <p><input type="checkbox"/> Site Visit/Evaluation \$100.00</p>

TYPE OF PROPOSED STRUCTURES AND SPECIFICATIONS: CHECK ALL THAT APPLY TO THE PROJECT.

New Structure(s)	Structure Type (same as boxes above)	Foundation Type (Basement, slab, Pier, etc)	Maximum Length (Exterior footprint only)	Maximum Width (Exterior footprint only)	Maximum Sq. ft. (Exterior footprint only)	Maximum Height (Ground level to roof peak)
			Feet	Feet	Sq. Ft.	Feet
			Feet	Feet	Sq. Ft.	Feet
Structure Additions	Structure Type (same as boxes above)	Foundation Type (Basement, slab, Pier, etc)	Maximum Length (Exterior footprint only)	Maximum Width (Exterior footprint only)	Maximum Sq. ft. (Exterior footprint only)	Maximum Height (Ground level to roof peak)
			Feet	Feet	Sq. Ft.	Feet
			Feet	Feet	Sq. Ft.	Feet

Site Sketch Form

The Sketch is to graphically illustrate your proposed project(s)

Draw and Label on Sketch (in feet)

- All Structures on the Property and Dimensions
- All Driveways, Access Roads, and Wetlands
- All Proposed Structures and Dimensions

- Distance of Proposed Structures to Shoreline (Closest Point)
- Distance of Proposed Structures to Septic System and Tank
- Distance of Proposed Structures to Property Lines
- Distance of Proposed Structures to Road Centerline and Right-of Ways

You may submit your own site sketch **IF it has the required information indicated above.**

Sanitary Review: (To be determined by appropriate sanitary authority.)

Will the proposal, as shown below, negatively impact the SSTS/sanitary line or replacement area? Yes No

Sign off:

Signature _____ Title _____


