



City of Montgomery  
Department of Building Safety  
201 Ash Avenue SW  
Montgomery, MN 56069  
Phone: 507-364-8888  
Fax: 507-364-5371

**PLANNING DEVELOPMENT APPLICATION**

**City of Montgomery**

201 Ash Ave SW  
Montgomery, MN 56069

**APPLICATION(S) FOR:**

\_\_\_\_\_ Rezoning (\$200)  
\_\_\_\_\_ Conditional Use Permit (\$200)  
\_\_\_\_\_ Amendments for CUP/PUD (\$200)  
\_\_\_\_\_ Sketch Plan (\$0.00)

File Number \_\_\_\_\_  
Fee Paid \_\_\_\_\_  
Completed Application \_\_\_\_\_  
Date Filed \_\_\_\_\_  
Zoning District \_\_\_\_\_  
PID \_\_\_\_\_

\_\_\_\_\_ Preliminary Plat (\$200)  
\_\_\_\_\_ Final Plat (\$200)  
\_\_\_\_\_ Variance (\$200)

1. Street Location of Property: \_\_\_\_\_
2. Legal Description of Property: \_\_\_\_\_
3. Names of all titleholders: \_\_\_\_\_  
Telephone Numbers: \_\_\_\_\_
4. Name of Applicant: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone Number \_\_\_\_\_ Fax Number \_\_\_\_\_
5. Name of Contact Person: \_\_\_\_\_  
Address of Contact Person: \_\_\_\_\_  
Telephone Number \_\_\_\_\_ Fax Number \_\_\_\_\_
6. Name of Architect/Engineer: \_\_\_\_\_  
Address of Architect/Engineer \_\_\_\_\_  
Telephone Number \_\_\_\_\_ Fax Number \_\_\_\_\_
7. Name of Architect/Engineer : \_\_\_\_\_  
Address of Architect/Engineer \_\_\_\_\_  
Telephone Number \_\_\_\_\_ Fax Number \_\_\_\_\_
8. Name of Plat: \_\_\_\_\_

The contact person noted on previous page will receive all review comments and requests for revisions from the city. They are responsible to inform all parties involved on the project of changes or updates that may occur throughout the process.

9. State proposed use and a description of project proposed or variance requested.

---

---

---

**NOTE: APPLICATIONS ARE NOT COMPLETE UNTIL ALL REQUIRED SUBMISSIONS HAVE BEEN RECEIVED.**

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Property Owner: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ FOR OFFICE USR ONLY -----

Date of Public Hearing: \_\_\_\_\_

Receipt Number: \_\_\_\_\_

Ordinance section: \_\_\_\_\_

Approved: \_\_\_\_ Denied: \_\_\_\_ By the Planning Commission on \_\_\_\_\_  
(Date)

Subject to the following conditions:

---

---

---

---

---

---

---

---

---

---

Approved: \_\_\_\_ Denied: \_\_\_\_ By the City Council on \_\_\_\_\_  
(Date)

Subject to the following conditions:

---

---

---

---

---

---

---

---

---

---