CASS COUNTY CONDITIONAL USE APPLICATION
INSTRUCTIONS TO APPLICANT

THIS INSTRUCTION SHEET, THE PERMIT APPLICATION, AND THE SKETCH PLAN MUST BE SIGNED AND RETURNED WITH THE PERMIT APPLICATION.
--WARNING--PROCEEDING WITHOUT A PERMIT

Any work within the shoreland zone in Cass County which requires a permit cannot be legally started until a permit is issued by the Cass County Environmental Services Department. Any such work done without a permit constitutes a misdemeanor punishable by fines of $700 and/or 90 days in jail. The Environmental Services Director also has the authority to require restoration of any work done without a permit or beyond the work authorized by a permit and will assess double the additional application fee.

1. All items must be completed before this application will be processed.

2. A site plan must accompany each application.
   - a. The site plan must show all existing buildings, lot lines and dimensions.
   - b. Well and septic systems.
   - c. Driveways, roads & highways.
   - d. Pertinent information such as distance to lake, width of project, height of ice ridge, etc.
   - e. If topography is unusual, show elevation levels.
   - f. Show "Proposed Project Area".
   - g. Indicate North point and slope of land.

3. Include ground-level photographs showing lake and upland conditions at the project site.

4. A $395.00 fee must accompany each conditional use application. Make check payable to the "Cass County Treasurer".

5. Accurate property descriptions (Parcel ID#) must be given and these are usually found on your tax statement or deed. Applicant must own property, have a valid lease, or be an authorized representative.

6. PLEASE INCLUDE YOUR PROPERTY ADDRESS or directions to property from a prominent point or landmark on the application in order for the zoning inspectors to find your property.

7. Locate and mark property lines or corner markers on the ground. Stake out the area of proposed project so that it is readily apparent to the inspector.

8. When you have completed the application and all accompanying plans, etc., mail or deliver it in person to the Environmental Services Department, Cass County Courthouse, PO Box 3000, Walker, MN 56484 along with the fee.

9. Accurate information must be given, as permits are granted on the express conditions that the person to whom it is granted, his agent, employees and workmen shall conform in all respects to the Cass County Land Use Ordinance. This permit may be revoked at any time upon violation of the ordinance.

10. You will be notified by mail as to the date and time of the hearing on your application.

11. The applicant is responsible for securing any other local, state, or federal permits that may be required. NOTE: If this application involves work in wetlands, additional permits and approvals will be required to comply with the Minnesota Wetlands Conservation Act and Army Corps of Engineers Regulations.

I have read and fully understand the above instructions. I hereby swear that all information provided in this application is true and correct.

APPLICANT SIGNATURE_   DATE

_____   _____

CONDITIONAL USE PROCESSING AND REVIEW POLICY

In order for Cass County to comply with Minnesota Statutes, Chapter 15.99 (processing time deadlines for agency action), these policy steps must be fulfilled before the Cass County Environmental Services Department (ESD) will accept a conditional use application as complete:

A. A pre-application meeting must be held between the applicant and ESD personnel to determine which of the following additional information items must be provided.

- [ ] A topographic survey showing 2 foot contour intervals.
- [ ] A topographic survey showing 10 foot contour intervals.
- [ ] Location and size of all wetlands.
- [ ] Location and dimensions of all structures.
- [ ] Individual sewage treatment system site evaluation.
- [ ] Individual sewage treatment system design submitted with this application.
- [ ] An approved MPCA Stormwater Permit if project disturbs over 1 acre.
- [ ] An engineered grading and erosion control plan.
- [ ] In shoreland areas, a vegetation or restoration plan.

FOR EXTRACTIVE USE APPLICATIONS—ENGINEERED PLANS AND DRAWINGS INDICATING:

- [ ] Plans and specifications that meet the requirements of Section (1107) of the Land Use Ordinance of Cass County, Minnesota
- [ ] Existing conditions and contours
- [ ] Operation phase cross sections
- [ ] Closure grading plan and contours
- [ ] Finished seeding and erosion control plan

ALL PROPOSED PROJECT PLANS MUST BE DRAWN TO SCALE AND 15 COPIES SUBMITTED AT THE TIME OF APPLICATION.
The pre-application meeting was held on _____ (date). It was agreed that the items checked above would be required for this application to be complete.

_____   _____
            Environmental Services Dept.   **Date**

_____   _____
                 Applicant or Agent   **Date**

Conditional Use Permit

Parcel ID # _____

Applicants Name:_____

Applicant is: **Owner:** _____ **Agent:_____**

Mailing Address: _____

City, State, Zip: _____

Day Time Phone: _____

Township: _____

Section :_____Twp: _____Rg:_____

E-911 Address: _____

Lake, River, Stream_____

Classification: _____

_____
Property Owners Signature   Date

_____
Applicants Signature (if different than Owner)

This Conditional Use Application is

hereby

Approved: _____ Denied: _____

By the Cass County Planning

Commission

Date: _____

By:_____

Property Information:

Property Became Lot of Record_____

Lot Width: _____

Lot Depth: _____

Water Frontage: _____

Total Acres: _____

ROW Setback _____Lake Setback _____

Property Line Setback _____

Building Height: _____

Previous Owner: _____

Year Sold: _____

Year SSTS installed: _____
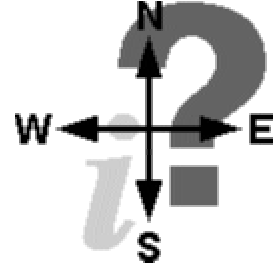
Date of Last Inspection:_____

Section of Ordinance: _____

Requested Use: _____

_____

_____

_____

See Meeting Minutes for Conditions &

Finding of Fact:

CASS COUNTY ENVIRONMENTAL SERVICES

SKETCH DESIGN SHEET

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S

I hereby certify and agree that the above sketch accurately represents the work to be done in conjunction with this permit or restoration order.

APPLICANT OR AGENT SIGNATURE: _____

DATE: _____