

**City of Hinckley
Box 366
106 First Street SE
Hinckley MN 55037
320-384-7491 (Fax) 320-384-7492**

SUBDIVISION APPLICATION FORM

(Preliminary Plat, Final Plat, Planned Unit Development, Minor Subdivision)

SITE INFORMATION

Project Address (If Available): Include Building or Suite No.			Date Applied:	Application No. (City Use Only)
Lot No.	Block No.	Subdivision Name	Parcel No. (Required) R 40. _____. _____. _____. _____	Application Fee: \$
Applicant Name			Requested Action: <input type="checkbox"/> Preliminary Plat <input type="checkbox"/> Final Plat <input type="checkbox"/> Minor Subdivision <input type="checkbox"/> Planned Unit Development	Fee Paid: Yes / No
Mailing Address of Applicant				Date: _____
Mailing Address of Applicant if not the Owner				Zoning District: Ind. CB GB P/SP RB AG R-__
			Telephone	

DESCRIPTION OF REQUEST

Description and reason for request (attach additional sheets if necessary):

SITE PLAN

A site plan or drawing shall be required with the permit application and shall include the lot dimensions, existing building locations, driveways and access points, building location of structure(s) being proposed in the application, and parking layout and dimensions. Please attach site plan as a separate sheet.

APPLICANTS SIGNATURE (Check One) ☐ Owner ☐ Authorized Agent

(If applicant is not the property owner, a signed statement from the owner authorizing the application must be submitted prior to final approval.)

I hereby certify that I have read this application and state that the above information is correct and that I am the owner or the duly authorized agent of the owner. I agree that all work will comply with all ordinances and codes of the City of Hinckley, the State of Minnesota and rulings of the Zoning and Building Departments. I hereby authorize representatives of the City to enter upon the above-mentioned property for inspection purposes. As the Applicant, I understand that the Planning Commission and City Council may request the attendance of myself or a representative at the meeting(s) where the request is being considered. Upon notice from the City, I understand that I am responsible for reimbursing the City for all costs, above and beyond the application fee, for professional services including but not limited to: engineering, legal, and financial advising, incurred by the City in connection with matters related to my request and enforcement of performance. An estimate of the costs of these additional services shall be provided to the Applicant upon request and shall be agreed to prior to the services being rendered. I agree to make reimbursement within 30 days of the date of the City's invoice and notice of costs.

Signature:

Print Name: _____

Date:

(Office use only)

Planning Commission Public Hearing Date: _____ City Council Meeting Date: _____