**City of Belle Plaine**
218 N. Meridian Street
P.O. Box 129
Belle Plaine, MN 56011

**Community Development Department**
**Phone**: 952-873-5553
**Fax**: 952-873-5509
**www.belleplainemn.com**

**Fee:** $200.00

# INTERIM USE PERMIT APPLICATION

| **PROPERTY** | Address: | | | | Belle Plaine, MN | P.I.N: | |
|---|---|---|---|---|---|---|---|
| Lot Number: | | Block Number: | | Subdivision: | | | |
| Zoning: | | | | | | | |

| **APPLICANT** | □ **Owner** | Name: | Phone: |
|---|---|---|---|
| Address: | | | Cell: |
| E-mail: | | | Fax: |

| **OWNER** | Name: | Phone: |
|---|---|---|
| Address: | | Cell: |
| E-mail: | | Fax: |

**Interim Use Permit is requested to:**_____

_____

_____

**SUBMISSION OF APPLICATION MUST INCLUDE:**

   □ Attached site plan (to scale) depicting present and proposed improvements.

**I certify** that I am the applicant named herein; that I have familiarized myself with the rules and regulations with respect to preparing and filing this application that the foregoing statements and answers herein contained and the information on the attached maps or site plans and any other documents submitted herewith are in all respects true and accurate to the best of my knowledge and behalf.

**APPLICANT  SIGNATURE:**_____  **DATE:**_____

## OFFICE USE ONLY

| Zoning: | Application Fee:  $ | Form of Payment: | |
|---|---|---|---|
| □ Site Plan | Other Fee:  $ | Date: | |
| | Total:  $ | Transaction Number: | |
| | | Collected By: | |

| Reviewed by Community Development Director | □ Application Complete | | Date: |
|---|---|---|---|
| Reviewed by Planning Commission | □ Tabled | □ Approved | □ Denied | Date: |
| Reviewed by City Council | □ Tabled | □ Approved | □ Denied | Date: |