

**CITY OF BELLE PLAINE**  
**APPLICATION FOR APPEAL CONSIDERATION**  
218 NORTH MERIDIAN ST., P.O. BOX 129, BELLE PLAINE, MN 56011  
PHONE 952-873-5553 FAX 952-873-5509

Total Fee \$	_____
Paid	_____
Receipt	_____
Date	_____
Initials	_____

Name of Applicant: \_\_\_\_\_

Address of Applicant: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Fax: \_\_\_\_\_

Email address: \_\_\_\_\_

Property at: \_\_\_\_\_ Property Owner: \_\_\_\_\_

PID: \_\_\_\_\_ Lot: \_\_\_\_\_ Block: \_\_\_\_\_ Addition: \_\_\_\_\_ Current Zoning: \_\_\_\_\_

***We, the undersigned, hereby make the following application to the Building Code Board of Appeals of the City of Belle Plaine, Scott County, MN. (Applicants have the responsibility of checking all applicable ordinances pertaining to their application and complying with all ordinance requirements.)***

\_\_\_\_\_ Fee is based on final calculation of staff time, remuneration of board members, mailing and postage and special  
Initial research associated to appeal request. Upon completion of the appeals process, the Building Official will notify the applicant of all fees associated with this request.

Legal description of land to be affected by application, including acreage or square footage of land involved, and street address, if any: (attach additional sheet if necessary). \_\_\_\_\_

Describe the type of building and work to be performed, along with any alternate materials or method of construction proposed: \_\_\_\_\_

Attached to this application and made a part thereof, are: \_\_\_\_\_ Site Plan  
\_\_\_\_\_ Building Plans & Specifications

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

Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Building Official Review: \_\_\_\_\_ Approved \_\_\_\_\_ Not Approved

Building Official Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Letter detailing decision Date mailed: \_\_\_\_\_ Applicant satisfied with decision   
Applicant dissatisfied with decision

Date forwarded to Building Code Board of Appeals: \_\_\_\_\_

Meeting date for Building Code Board of Appeals \_\_\_\_\_

Decision of Building Code Board of Appeals \_\_\_\_\_ Approved \_\_\_\_\_ Not Approved Date: \_\_\_\_\_