



REZONE APPLICATION

\$400

CITY OF PINE ISLAND

250 South Main Street – PO Box 280

Pine Island, MN 55963

www.pineislandmn.com

Phone: (507)356-4591/Fax: (507)356-8230

Rezone standards and application process can be found in city code Sec. 11.16

GENERAL INFORMATION

1. Applicant & Property

Property Owner Name:	
Site Address:	Parcel ID:
Phone #:	E-mail:

2. Current Zoning District _____

Proposed Zoning District _____

3. Reasoning - Please provide an explanation as to the need for a rezone

4. Proposed Use of Property

5. Does the proposed zoning remain contiguous with surrounding zoning areas? _____

6. Will the proposed zoning be compatible with present and future land use? _____

7. Certification of taxes paid- Applicant shall provide certification that there are no delinquent property taxes, special assessments, interest, or City utility fees due on the property

This application to the best of my knowledge meets the requirements set forth in City Code, Chapter 11, Sec. 11.16, Sub. 1-4

Property Owners Signature: _____ **Date:** _____

Applicant Signature: _____ **Date:** _____



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City Use Only

Received By:	Date Received:
Deadline:	\$400 Fee Paid:
Dates of Publication:	
Paper of Publication:	
Notices mailed on:	
Mailed by:	
Property Taxes, assessments, interest, city utilities are current:	
Date of Planning Commission Meeting: (Public Hearing)	
Approved or Denied: (Reason for denial)	
Date of Council Meeting:	
Approved or Denied: (Reason for denial)	
Application Extension Information (If applicable)	
Reported to County On: (Other Information)	
Applicant Notified: (Date, By Whom, Via)	