

Community Development Department 590 40th Ave. NE, Columbia Heights, MN 55421 Phone: (763) 706-3670

PRELIMINARY/FINAL PLAT APPLICATION ORDINANCE NO. 9.104 (L), 9.104 (M), 9.116 (C) – 9.116 (D)

PROPERTY INFORMATION			
Proposed Name of Plat:			
Project Address/Location:			
Legal Description of Property:			
Present use of property:			
Proposed use of property:			
PROPERTY OWNER (As it appears on pr			
Company/Individual (please print):			
Contact Person (please print):			
Mailing Address:			
City:	State:	Zip:	
E-mail Address:			
Signature/Date:			
APPLICANT:			
Mailing Address:			
City:	State:	Zip:	
Daytime Phone:	Cell Phone: _		
E-mail Address:			
Signature/Date:			
Disclaimer: Information submitted, inc	cluding contact informa	ation shall be made available to the public, unles	SS
otherwise noted.			



REASON FOR REQUEST (please attach a written narrative describing your request and justification for approval. The				
narrative must fully describe the proposal to insure its compatibility with the surrounding uses and its consistency with Zoning requirements and the Comprehensive Plan.				
with Zonning requirements and the Comprehensive Plan.				
FOR OFFICE USE ONLY				
CASE NO:				
DATE APPLICATION REC'D:	APPLICATION REC'D BY:			
\$1000 PRELIM/FINAL PLAT APPL FEE REC'D:	RECEIPT NUMBER:			