

APPLICATION FOR REZONING or ORDINANCE TEXT AMENDMENT

FEES

___Application fee: \$500.00 ___Recording Fee (Rezoning only)

\$46.00 Payable: Waseca County Recorder

Name of Applicant (first)	(middle)	(last)
Address of Applicant	Phone Number	e-mail address
Type of Request:Rez	zoning (zoning district boundary amendment)	Ordinance Text Amendment
REZONING (Zoning District B	oundary Amendment)	
Legal Description of Property		
Surveyor Name and Address	Surveyor Phone Number	Surveyor e-mail
Engineer Name and Address	Engineer Phone Number	Engineer e-mail
Required Submittals:		
and parking setbacks from	Recording Fee	sting and proposed streets, grading and
ORDINANCE TEXT AMEND	MENT	
Ordinance Section/s Proposed for	Amendment	
Required Submittals:		
Proposed Ordinance Langua Narrative describing the requ	geApplication Fee uest and reasons for the requested ordinance amendn	nent

agrees to pay all costs associated with the vacation	on request.	
Signature and Address	 Date	_
Signature and Address	Date	_
Signature and Address	 Date	
Signature and Address	Date	_
Signature and Address	 Date	_

Acknowledgement and Signature: The undersigned hereby represents upon all of the penalties of law, for the purpose of inducing the City of Waseca to take the action herein requested, that all statements herein are true and that all work herein mentioned will be done in accordance with the ordinance of the City of Waseca and the laws of the State of Minnesota. The undersigned hereby consents that City of Waseca officials, employees, appointed commissioners and consultants hired by the City may enter the property to inspect the layout of structures, proposed placement of planned structures and additions, and the property's site features and dimensions. The undersigned