

Received on: _____

Fee: \$200.00 plus \$10.00 per lot

Total Fee: \$ _____

APPLICATION FOR PLATTED SUBDIVISION

(Rev 01/2021)

Clay County Planning & Zoning

3510 12th Avenue South, PO Box 280, Moorhead, MN 56561-0280

Ph: 218-299-5005 / Fax: 218-299-5195

planning@claycountymn.gov

Owner/Developer: _____ Phone Home: _____

Box/Street Address: _____ Phone Cell: _____

City/State/Zip: _____ Email: _____

Name of Surveyor or Engineer: _____

Location of Property: Township: _____ Range: _____ Section: _____

Quarter: _____ How many acres in this parcel: _____

Tax Parcel ID# (parent parcel) _____ . _____ . _____

Will any lot be located within 1000 feet of a lake or 300 feet of a river/stream? _____

If yes, list name of lake, river, or stream: _____

Number of lots intended: _____ Approximate size of lots (in acres) _____

Intended use of lots: _____

Source of water supply: _____ Method of sewage: _____

Are there restrictive covenants?: _____ If yes, attach a copy

Is there a zoning change contemplated?: _____ If yes, describe the proposed change and area to be affected.

Information requested by Zoning Administrator: Plat drawing in accordance with MN Statute

Applicant's Signature: _____ Date: _____

If this plat is within *Hawley Township*, signature of Hawley Township is required before submittal to Planning & Zoning:

X _____

Signature – Hawley Township

Office Use Only

Planning Commission

Fee paid: _____ Date paid: _____ Hearing date: _____

Preliminary approval is:

- () Granted:
- () Granted subject to the following conditions:
- () Denied for the following reasons:

x _____

Dated this _____ day of _____, 20 ____

Chairperson, Clay County Planning Commission

Board of Commissioners

Meeting date: _____

Final approval is:

Granted:

Denied for the following reasons:

x _____ Dated this _____ day of _____, 20 _____

Chairperson, Clay County Board of Commissioners