



## CITY OF ST. CLOUD COUNTY WATER & WASTEWATER DEVELOPMENT REVIEW APPLICATION

**FOR OFFICIAL USE ONLY**

Date Received: \_\_\_\_\_

Case #: \_\_\_\_\_

Applicant: _____	Agent: _____
Contact: _____	Contact: _____
Address: _____	Address: _____
_____	_____
Phone: _____	Phone: _____
Email: _____	Email: _____

Legal Owner(s) of Property (List all recorded owners): \_\_\_\_\_

Owner Address: \_\_\_\_\_

Project Name: \_\_\_\_\_

Site Location/Address: \_\_\_\_\_

Area of Development (Acreage or Square Feet): \_\_\_\_\_

Parcel Identification Number(s) (List all): \_\_\_\_\_

Application Type: \_\_\_\_\_

Number of Units/Lots: \_\_\_\_\_ SF \_\_\_\_\_ MF \_\_\_\_\_ MH

Future Land use: \_\_\_\_\_ Proposed Future Land Use: \_\_\_\_\_

Zoning: \_\_\_\_\_ Proposed Zoning: \_\_\_\_\_

Phasing Schedule: To be completed by applicant for projected build out. (required, if applicable)

Unit Type	2019	2020	2021	2022	2023	2024 -2025	2026 -2031	2032 - beyond
SF								
MF								
MH								
<b>Totals</b>								

**TOTAL ALL:** \_\_\_\_\_

I certify that I have reviewed the Land Development Code and that my submission meets all requirements. The only exceptions are those items to which I am requesting variances to or waivers from certain sections of the code and understand that they must be listed on the plans individually and on the attached transmittal. I understand that if an item does need a variance, it will be necessary to file through the appropriate governing body.

APPLICANT/AGENT SIGNATURE	APPLICANT/AGENT NAME and TITLE	DATE
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