APPLICATION FOR PRELIMINARY PLAT

Department of Environmental Services Kandiyohi County Zoning

County Office Building, 400 Benson Ave SW, Willmar, MN 56201, 320-231-6229

Version: January 2012 Fee _____ Date Received _____ Application Number _____ **OFFICE USE** Preliminary Hearing Date ______ Final Hearing P.C. _____ Zone _____ Excel ____ Final (Co. Board) Name of Applicant _____ First Last Mailing Address City: State: Zip Tax Parcel Number _____ Daytime Phone _____ Property Address_____ Lake: _____ Township _____ Section _____ Legal Description ____ NAME OF PLAT: _____ Total Number of Lots: _____ The approval of this proposal does not negate the need to secure other permits from other local units of government, state agencies or federal agencies who may also have jurisdiction over portions of your project. Signature of Applicant ______ Date_ DOB PLANNING COMMISSION RECOMMENDATIONS:

Chair

Date: