

# CITY OF ELY APPLICATION

Planning & Zoning 209 E Chapman St., Ely, MN 55731  
218-226-5475

\_\_\_ REZONING (\$175)    \_\_\_ CONDITIONAL USE PERMIT (\$250)    \_\_\_ VARIANCE (\$150)

**APPLICANT INFORMATION:**

A. Applicant / Owner \_\_\_\_\_ Phone no. \_\_\_\_\_

Address \_\_\_\_\_

Authorized Representative \_\_\_\_\_ Phone no. \_\_\_\_\_

Address \_\_\_\_\_

B. Parcel Code \_\_\_\_\_

Legal Description \_\_\_\_\_

Address of affected property \_\_\_\_\_

C. Current Use of Property \_\_\_\_\_

D. Proposed Use of Property \_\_\_\_\_

E. Zoning District (see city zoning map) \_\_\_\_\_

F. Lot Dimensions

Width \_\_\_\_\_ ft.

Length \_\_\_\_\_ ft.

Area \_\_\_\_\_ sq. ft.

G. Dimension(s) of Proposed Building or Addition

\_\_\_\_\_ ft. x \_\_\_\_\_ ft. = \_\_\_\_\_ sq. ft.

Bldg. height \_\_\_\_\_ ft. = \_\_\_\_\_ Stories

Total Area (including new) \_\_\_\_\_ sq. ft.

H. Proposed setbacks of Building or Addition (in ft.)

Front yard \_\_\_\_\_ Side Yard (NSEW) \_\_\_\_\_ Side Yard (NSEW) \_\_\_\_\_ Rear Yard \_\_\_\_\_

I. Description of Request \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

J. Reason for Request \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

K. Variance Applicants. What are you requesting a variance for?

Sideward (NSEW) \_\_\_ Front yard \_\_\_ Rear yard \_\_\_ Total Building Coverage \_\_\_

Other description \_\_\_\_\_

L. A lot layout will be provided by the applicant showing present & proposed structures, square footage of all structures and distance(s) of structure(s) from property lines.

Note: *The following M-P must be addressed before a **variance** can be considered.*

M. Difficulties or Hardship to Owner: Explain in detail what undue hardship would result, or what exceptional difficulty would result, if a variance is not granted. Why is a variance necessary?

\_\_\_\_\_

\_\_\_\_\_

N. Alternatives: What are your alternatives to a variance? Please list up to two alternatives, explaining each one and comparing it to your request. (Attach a separate sheet of paper if needed.)

Alternative 1: \_\_\_\_\_  
\_\_\_\_\_

Alternative 2: \_\_\_\_\_  
\_\_\_\_\_

O. Exceptional conditions of the Lot: What special conditions (shape of lot, exceptional topographic or other extraordinary conditions) apply to the structure or land in question that are peculiar to the property involved and do not apply generally to other land or structures in the district in which said land is located?

\_\_\_\_\_  
\_\_\_\_\_

P. Effect on neighborhood and Comprehensive Plan: What effect would the variance have on traffic; public parking; emergency fire, police, or ambulance access; surrounding property values; public health, safety, and welfare in general; or the interest of the Zoning Ordinance and Comprehensive Plan?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I hereby certify that I am the owner or authorized agent of the owner of the above property and that all uses will conform with existing state laws and ordinances. I further certify that I will comply with all conditions placed upon this permit should this application be approved. Intentional and unintentional falsification of this application or any attachments thereto will serve to make this application and any resultant permit invalid.

Name of property owner (print) \_\_\_\_\_

Signature of Applicant or Authorized Agent \_\_\_\_\_

Date \_\_\_\_\_

**OFFICE INFORMATION**

Date Permit Received \_\_\_\_\_ Fee \_\_\_\_\_

Date / Place / Time of Hearing \_\_\_\_\_

Result of Hearing: Permit Granted \_\_\_\_\_ Permit Denied \_\_\_\_\_ Application Withdrawn on \_\_\_\_\_

Zoning Administrator Signature \_\_\_\_\_

Conditions set by Board / Commission \_\_\_\_\_  
\_\_\_\_\_