

PERMIT APPLICATION PROCESS

City of Finlayson Zoning Administrator: Ed Melzark
612-390-3568
zoning@finlayson.gov

City of Finlayson
PO Box 244
2217 Finland Avenue,
Finlayson, MN 55735
320-233-6472

1. Pre-Application Inquiry (Optional but Recommended)

Applicant contacts the Zoning Administrator to discuss the project and determines the necessary permits. The Zoning Administrator provides guidance on zoning requirements, necessary documents, and applicable fees. Permit applications can also be found on-line at finlayson.gov

2. Submit Permit Application

Applicant completes the Permit Application Form found on-line at finlayson.org or picked up from the City Clerk. Next, submit the application (s) to the City Clerk or Zoning Administrator along with: the following:

- Site plan or property survey (if required)
- Building plan or project details
- Any additional supporting documents
- Payment of initial application fees to the City Clerk

3. Zoning Administrator Review

The Zoning Administrator reviews the application for compliance with city zoning ordinances. If the application meets zoning requirements, the Zoning Administrator approves or denies standard permits (e.g., land use, signage, accessory structures.)

3a. If the permit requires:

1. **Additional approval:** (e.g. Conditional Use Permit, Variance, Rezoning), the Zoning Administrator forwards it to the Planning & Zoning Commission
2. **Planning & Zoning review:** Planning and Zoning Commission reviews the application that require public hearings or special approval (e.g. Conditional Use Permit, variances, rezoning). A public hearing is required at the applicants expense, notices are sent to affected property owners, and a hearing date is set. The Commission makes a recommendation to the City Council for final approval.
3. **City Council review:** City Council reviews the Planning and Zoning Commission recommendation and votes on final approval or denial.

4. Permit Issuance & Inspections

Once approved, and all fees are paid in full, the Zoning Administrator will issue the permit (s). Permits are good for one year or an extension can be applied. The City Clerk will email a copy of the permit to the applicant and a copy will be made available at City Hall. The applicant may be required to schedule inspections (if applicable) to ensure compliance.

5. Project Completion & Compliance Check

Upon project completion, the Zoning Administrator conducts a final check. If all requirements are met, the permit is closed.

Processing Timeline:

- Standard Zoning Permits: Generally approved within 14 calendar days
- Permits Requiring Planning & Zoning Commission Review: Decision generally within 60 days (to allow for meeting schedules, hearing notice requirements per **MN Statute 394.26**)
- City Council Approval (if required): Added to the next available council agenda.

Note: Applications will not be processed until **both** a complete application **and** full payment have been received. Incomplete or unpaid applications may be returned to the applicant. The review timeline will begin **only upon receipt of a complete, accurate, and paid application.**



CITY OF FINLAYSON

LAND USE PERMIT APPLICATION

Planning Zoning, City of Finlayson
 PO Box 244, Finlayson, MN 55735
zoning@finlayson.gov
www.finlayson.gov
 Zoning Administrator, Ed Melzark
 Phone 612-390-3568

PROCEDURE

1. Submit completed application, site plan, and permit fee. A separate fee will be required for each structure on the application. Place stakes marking the parameter of the proposed project(s).
2. The Zoning Administrator will conduct an inspection to determine that all applicable rules and regulations are met. **NOTE: All federal, state and county permits must be obtained before the land use permit is issued.**
3. The City of Finlayson issue permit(s) for compliant work or notify the applicant if the project is NOT permissible. Permits are valid for one (1) year with possible extensions, provided work commences within 180 days.
4. Once the permit is issued, the project can commence. **Commencement prior to permit issuance is a violation and will be subject to additional fees outlined in the Zoning ordinance(s) and fee schedule.**
5. Once the project is completed, contact the Zoning Administrator. The ZA will conduct a final inspection to ensure project(s) were completed as permitted.

PROPERTY INFORMATION

| | | |
|--|--|--------------------------------|
| PROPERTY ID (PID): <i>(found on tax statement)</i> | ASSOCIATED PROPERTY ID (PID): <i>(adjacent-owned or others related to project)</i> | |
| Site Address, if applicable: | | Today's Date: |
| Subdivision: | Lot: | Block/Parcel: Zoning District: |

PROPERTY OWNER

| | |
|------------------|--------|
| Name: | |
| Mailing Address: | Email: |
| City, State, ZIP | Phone: |

PROPERTY CONTACT (if different than above)

| | |
|------------------|--------|
| Name: | |
| Mailing Address: | Email: |
| City, State, ZIP | Phone: |

CONTRACTOR INFORMATION

| | |
|--|------------|
| Contractor (company) & Contact (person): | License #: |
| Phone: | Email: |

Contractor License Notice: Most residential construction work in Minnesota requires a license through the MN Department of Labor and Industry (DLI). It is the contractor's or applicant's responsibility to ensure licensing compliance. The City of Finlayson does not verify or enforce licensing status. Learn more at: www.dli.mn.gov

OWNER/BUILDER INFORMATION (if you are not hiring a contractor)

If you are building yourself & claim exemption from State Contractor Licensing Laws, please read & sign below: I certify that I am the property owner and that I am exempt from the Minnesota Contractor Licensing Law because I am personally performing the construction work or coordinating it for my own residential property.

I understand that it is my responsibility to comply with applicable state laws and codes.

| | |
|---------------------|-------|
| Owner(s) Signature: | Date: |
|---------------------|-------|

PROJECT INFORMATION

Proposed Start Date:

Proposed Completion Date:

WHAT ARE YOU APPLYING FOR? (Check all that apply)

| All Residential Zoning Districts – Dwelling Including Agriculture | Residential - Additions & Alterations |
|---|---|
| <ul style="list-style-type: none"> <input type="checkbox"/> New single-family dwelling (primary residence, manufactured) <input type="checkbox"/> Accessory dwelling unit (guest house, bunk house, in-law suite) <input type="checkbox"/> Replace existing dwelling: Will old dwelling be removed? Yes No <input type="checkbox"/> Agriculture <input type="checkbox"/> Accessory Structure <input type="checkbox"/> Moving a dwelling | <ul style="list-style-type: none"> <input type="checkbox"/> Dwelling addition (bedroom, porch) <input type="checkbox"/> Attached garage or Carport (garage, pole building, shed, sauna, screenhouse, gazebo) <input type="checkbox"/> Enlarge / change existing foundation <input type="checkbox"/> Roofline / height modification <input type="checkbox"/> Porch (enclosed or open-air) <input type="checkbox"/> Deck / Patio |
| Industrial / Commercial | Other / Special Use |
| <ul style="list-style-type: none"> <input type="checkbox"/> Commercial building (new or expansion) <input type="checkbox"/> Industrial building (new or expansion) <input type="checkbox"/> Sign permit <input type="checkbox"/> Cell tower or Equipment install | <ul style="list-style-type: none"> <input type="checkbox"/> Multifamily Dwelling (two or more residences) <input type="checkbox"/> New multi-family dwelling (townhome, duplex, etc.) <input type="checkbox"/> Conditional Use Permit (if required by zoning ordinance) <input type="checkbox"/> Rezoning or Zoning Map amendment <input type="checkbox"/> Demolition Permit <input type="checkbox"/> Variance requested (attach) <input type="checkbox"/> Minor Subdivision -- See checklist <input type="checkbox"/> Major Subdivision -- See checklist <input type="checkbox"/> Subdivision / Lot Line Adjustment <input type="checkbox"/> Other (describe): |
| Accessory Structure | Land Alteration / Utilities |
| <ul style="list-style-type: none"> <input type="checkbox"/> Detached Garage <input type="checkbox"/> Fence <input type="checkbox"/> Greenhouse / Hoophouse <input type="checkbox"/> Agricultural - Animal shelter / chicken coop <input type="checkbox"/> Pole Barn <input type="checkbox"/> Sauna <input type="checkbox"/> Shipping container – number applied for _____ <input type="checkbox"/> Solar <input type="checkbox"/> Retaining wall <input type="checkbox"/> Shed/ Storage Building/ Shipping Container <input type="checkbox"/> Swimming Pool <input type="checkbox"/> Storage POD (Portable Storage Container) <input type="checkbox"/> Other | <ul style="list-style-type: none"> <input type="checkbox"/> Driveway or parking area <input type="checkbox"/> Grading or excavation <input type="checkbox"/> Fill or earthwork <input type="checkbox"/> Drainage changes/storm water management |

Distance from (lin. ft)

| PROJECT DESCRIPTION | DIMENSIONS (L' x W' x H') | Tot. Sq. Ft | Road Center Line | Side Prop Line | Rear Prop Line | OHWL (If Applicable) | Does it Meet Set Back Requirement |
|---------------------|---------------------------|-------------|------------------|----------------|----------------|----------------------|-----------------------------------|
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

WATER SUPPLY AND SEWAGE TREATMENT SYSTEMS

| Existing Sewage Treatment System | Proposed Sewage System (if new/upgrade) | Additional Info |
|---|--|--------------------|
| <input type="checkbox"/> Municipal / City Sewer <input type="checkbox"/> Private Septic (individual subsurface sewage treatment system - ISTS) <input type="checkbox"/> None / Vacant Lot <input type="checkbox"/> Other | <input type="checkbox"/> Connect to Municipal / City Sewer <input type="checkbox"/> Private – Mound, Other <input type="checkbox"/> Private Septic (individual subsurface sewage treatment System – ISTS) <input type="checkbox"/> None | Pine Co. Permit #: |
| Existing Water System | Proposed Water System (if new/upgrade) | Additional Info |
| <input type="checkbox"/> Private Well <input type="checkbox"/> Municipal / City Water Connection <input type="checkbox"/> None / Vacant Lot <input type="checkbox"/> Sprinkler System | <input type="checkbox"/> Connect to Municipal / City Water <input type="checkbox"/> Private well (mark on site plan) <input type="checkbox"/> None | State Permit #: |

EASEMENT INFORMATION

Are there any known or recorded Easements? Yes No If Yes, attach copy

Is any part of the proposed construction within or near an easement? Yes No

Attach a copy of your property's recorded survey or plat map, if available, showing easements. You can purchase these online at: landshark.pinecountymn.gov/LandShark/#/

Declaration: I hereby certify that I am the legal owner of the property listed above or an authorized agent acting on behalf of the owner. I agree that all proposed uses and work described in this application will conform to the applicable ordinances and regulations of the City of Finlayson, Pine County, and the State of Minnesota. I further agree to comply with all conditions attached to any permit or approval granted because of this application.

Applicant's Signature: _____ Applicant is the (check one): OWNER AUTHORIZED AGENT

Applications will not be processed without the appropriate worksheet(s) accompanying the Land Use Permit Application.

Signature of this application by the legal property owner or a licensed contractor, as the owner's representative is required and authorizes the City of Finlayson Zoning Administrator or designee to enter upon the property to perform needed inspections. Entry may be without prior notice Monday - Friday, 8AM - 4PM. I hereby acknowledge that I have read this application and state that all information is true and correct to the best of my knowledge. I further agree that all work performed will be in accordance with approved plans, specifications and conditions, and to abide by all the ordinances of the City and the Laws of the State of Minnesota regarding actions taken pursuant to this permit. I agree to pay all plan review fees even if I choose not to proceed with the work. Permit expires when building and work is not commenced within 180 days from date of Permit issued, or if building and work suspended, abandoned or not inspected for 180 days.

SIGNATURE OF APPLICANT: _____ DATE: _____

AGREEMENT:

1. I certify and agree that I am the owner or the authorized agent acting on behalf of the owner of the property, and that all uses will conform to the provisions of City of Finlayson.
2. I further certify and agree that I will comply with all conditions imposed in connection with the approval of the application.
3. I certify that the separation distances on the sketch plan are the best of my knowledge true and correct. Intentional or unintentional falsification of this application or any attachments thereto will serve to make this application and any resultant permit invalid.
4. I consent to site visits by the zoning administrator or authorized personnel.

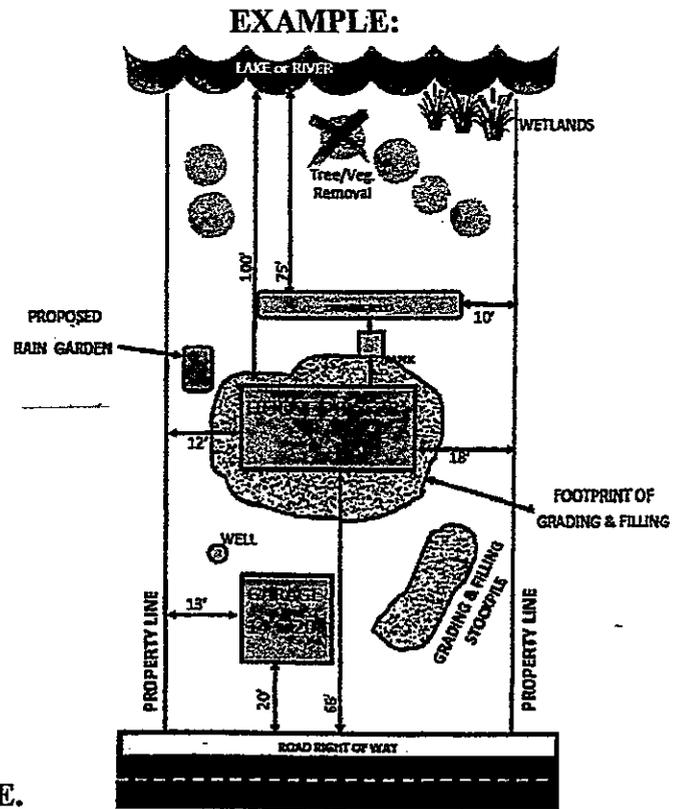
**A PERMIT MUST BE ISSUED PRIOR
TO ANY ACTIVITY TAKING PLACE ON THE PROPERTY.**

Applicants name owner agent Applicant's Signature Date

DRAW AND LABEL ON SKETCH (in feet)

- All proposed structures and dimensions
- All driveways, access roads, parking pads, sidewalks
- All existing structures on the property and dimensions
- All lakes, streams, wetlands
- Distance of proposed structures to septic systems and wells
- Distance of proposed structures to property lines
- Distance of proposed structures to road center line and right-of-way (s)
- Distance of proposed structures to shoreline (closest point)
- Areas of trees/vegetation clearing
- Areas of grading/filling and stockpile locations
- Stormwater management and erosion control features

**YOUR SKETCH MUST HAVE THE
REQUIRED INFORMATION INDICATED ABOVE.**



| | |
|---|--|
| <p><small>Draw and Label on Sketch (in feet)</small></p> <ul style="list-style-type: none"> <input type="checkbox"/> All proposed structures and dimensions <input type="checkbox"/> All driveways, access roads, parking pads, sidewalks <input type="checkbox"/> All existing structures on the property and dimensions <input type="checkbox"/> All lakes, streams, and wetlands | <ul style="list-style-type: none"> <input type="checkbox"/> Distance of proposed structures to septic system and wells <input type="checkbox"/> Distance of proposed structures to property lines <input type="checkbox"/> Distance of proposed structures to road centerline and right-of-way(s) |
|---|--|

