

Zoning Request Form

THIS IS NOT THE OFFICIAL APPLICATION

For assistance with filling this form out, please contact the
Sibley County Zoning Administrator at
(507) 237-4091 or Zoning@co.sibley.mn.us

Date: _____

Name of Property Owner: _____

Name of Applicant (if different from above): _____

Parcel ID Number: _____

Physical Property Address: _____

Legal Description: Section _____ Township _____ Range _____

Description of what is being applied for (be as specific as possible):

Estimated Cost: \$ _____

Planned Use (circle): Commercial Personal Business Other (please specify): _____

If Commercial - # of Employees: _____

Amenities (circle): Electric Heated/Insulated Concrete Office Space

Other (please specify): _____

Septic Information:

Running Water: Y / N

Bathroom: Y / N

Sink: Y / N

Interior Drains: Y / N

If yes, these items may require further information or septic permits

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The applicant is to also provide the following items:

- An aerial photo with the EXACT location of proposed structure and setback measurements from public roads, property lines and any existing structures. If you do not have access to a computer for an aerial photo, attach a detailed sketch plan with the proposed structure AND existing structures, as well as all setback measurements.
- Any surveys that are applicable
- Any other permits required from other agencies if applicable (MPCA, FAA, MNDOT, etc.)

Phone Number: _____

Mailing Address: _____

Email Address: _____

Preferred Method of Contact: Phone Mail Email

Please return this form and any attached documents either by mail OR email to:

Property Assessing & Zoning Department
PO Box 532
Gaylord, MN 55334

Zoning@co.sibley.mn.us