



# ROCK COUNTY PLANNING AND ZONING

## APPLICATION FOR A LAND USE PERMIT

LANDOWNER NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

APPLICANT NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_  
 (If other than landowner)

ADDRESS : \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

TOWNSHIP: \_\_\_\_\_ SECTION: \_\_\_\_\_ QTR SECTION: \_\_\_\_\_

APPLICATION TO:		CLASS OF STRUCTURE:	
<input type="checkbox"/> ERECT	<input type="checkbox"/> MOVE	<input type="checkbox"/> DWELLING	<input type="checkbox"/> COMMERCIAL
<input type="checkbox"/> ADD TO	<input type="checkbox"/> DEMOLISH	<input type="checkbox"/> AG	<input type="checkbox"/> PERSONAL
<input type="checkbox"/> ALTER	<input type="checkbox"/> OTHER:	<input type="checkbox"/> LIVESTOCK	

\*New homes must obtain an E911 Address\*

<b>USE/TYPE OF STRUCTURE:</b>	
<b>OUTSIDE DIMENSIONS OF STRUCTURE:</b>	
<b>ESTIMATED COST OF PROJECT:</b>	

TYPE OF FRAMING:			TYPE OF SKIN:		
<input type="checkbox"/> POLE	<input type="checkbox"/> STEEL	<input type="checkbox"/> HOOP	<input type="checkbox"/> WOOD	<input type="checkbox"/> VINYL	<input type="checkbox"/> CONCRETE
<input type="checkbox"/> WOOD	<input type="checkbox"/> CONCRETE	<input type="checkbox"/> OTHER:	<input type="checkbox"/> STEEL	<input type="checkbox"/> BRICK	<input type="checkbox"/> OTHER:

SETBACKS (in feet):	STRUCTURE HEIGHT:
FROM CENTERLINE OF ROAD:	PEAK:
FROM SIDE PROPERTY LINE:	SIDEWALL:
FROM REAR PROPERTY LINE:	

<b>TENTATIVE START DATE:</b>	<b>COMPLETION DATE:</b>
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Permit Fee Due: \$ \_\_\_\_\_

**NOTICE:** Contact The Rock County Land Management Office **BEFORE CONSTRUCTION**

- **SEPTIC PERMIT:** Must be obtained for a new family dwelling or bedroom addition before construction.
- **FEEDLOT PERMIT:** Must be obtained for a new, expanding, or otherwise altered feedlot(s), including transfer of ownership, you must obtain a feedlot permit from Rock County Land Management or the Minnesota Pollution Control Agency before construction. For technical assistance on manure management systems, including costs & design options contact Rock County Land Management Office, 507-283-8862.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Date Stamp / Initial

**For Office Use**

<b>Receipt Number</b>	
<b>Parcel Number</b>	. .
<b>E911 Address</b>	