

CITY OF LAUDERDALE LAUDERDALE CITY HALL 1891 WALNUT STREET LAUDERDALE, MN 55113 651-792-7650 651-631-2066 FAX

<u>Fee</u>	Escrow Type of Request	Summary of Request
\$150 \$150 \$200 \$200 \$200 \$500 \$500 \$500 Docur	\$0 Sign Permit \$500 Conditional Use \$1,000 Lot Line Rearrangement \$1,500 Zoning Amendment* \$1,500 Subdivision* \$5,000 PUD* ment Recording Fee: Recording cost plus	
	cant Information	Owner Information (if different)
Name	<u></u>	Name:
Addre	ess:	Address:
Dhone	Z:	C, S, Z:
Email	e:	Phone:
Signa	: ture:	Email:Signature:
city's c conside the city	consultants' costs associated with reviewing the ered by the city, the applicant must deposit an exist's consultants' costs as determined by the city actial escrow deposited by the applicant, an add	ication fee and deposit an escrow fee to cover the associated request. Prior to having the request scrow fee in an amount that is estimated to cover alministrator. If the city's consultants' costs exceed litional escrow fee will be required to cover the esto cover the city's actual consultants' costs in

Review Timeline: All applications, other than concept plans, must be complete before being formally reviewed. Minnesota Statute provides 15 days to determine the application's completeness. Completeness depends on whether or not the checklist items are fulfilled.

Checklist: Please review the checklist for the type of application you are applying for.

For Office Use Only PIN	# :			
Date of Complete Application: _	Amount Paid:	Receipt #:		
Escrow Fee Paid:I	Receipt # Date Escrow	Returned:		
PC Recommendation: (approve/deny) Meeting Date:				
Public Hearing Date: CC Action: (approved/denied) Meeting Date:				
Conditions?				