

BALDWIN TOWNSHIP PRELIMINARY & FINAL PLAT

30239 128TH STREET, BALDWIN TWP, MN 55371

(763) 389-8931

RETURN TO: TOWN.CLERK@BALDWINTWPMN.COM

□ PRELIMINARY PLAT	***FOR OFFICE USE ONLY *** FOR OFFICE USE ONLY***
U PRELIMINARI PLAI	Date Application Received:
☐ FINAL PLAT	Date Application Complete:
Base Fee: \$ 500 Escrow: \$5,000	Planning Commission/ Public Hearing Date:
	Town Board Approval/Denial Date:
Total Amount Due: \$	60-Day Review Period Ends:
Amt. Paid:	60-Day Extension:YesNo Expires On:
CC/Check#	Received By:
Property Information Street Address Property Identification Number (P	cation Fee: \$1,200/lot S: PID#): scription of Metes & Bounds if necessary):
Applicant Information Name:	Business Name:
Mailing Address:	
City:	State: Zip Code :
Home Phone:	Cell Phone: Work:
e-mail (home):	
e-mail (work):	

Name: _____ Business Name: ____ Mailing Address: _____ _____ State: _____ Zip Code :_____ City: ____ Home Phone: _____ Work: _____ e-mail (home): e-mail (work):_____ **Description of Request** (attach additional sheets as necessary) Existing Use of Property: Description of Proposed Use: Lot Size: _____ Zoning: _____ Number of New Lots: Number of Total Lots: Reason(s) to Approve Request: Please describe any previous applications pertaining to the subject site: Project Name:______ Date of Application: _____ Nature of Previous Request :_____ **Existing Building Sizes:** RESIDENTIAL LOTS: House: _____SF Garage: _____SF (attached/detached?) COMMERCIAL/INDUSTRIAL LOTS: Main Building: _____Total Square Feet Office Area: _____SF; Warehouse/Storage: ____SF; Manufacturing: ____SF ALL LOTS: Accessory Buildings: (type/size) ______/___SF: _____/___SF _____/___SF: ____/___SF

Property Owner Information (If other than applicant):

I, the undersigned, hereby apply for the considerations described above and declare that the information and materials submitted in support of this application are in compliance with adopted Township policy and ordinance requirements and are complete to the best of my knowledge.

I understand that this application will be processed in accordance with established Town review procedures and Minnesota Statues 15.99 at such time as it is determined to be complete. Pursuant to Minnesota Statutes 15.99, the Town will notify the applicant within fifteen (15) days from the filing date of any incomplete or other information necessary to complete the application. Failure on my part to supply all necessary information as requested by the Township may be cause for denying this application.

Signature of Applicant:	Date:
Signature of Applicant:	Date:
Signature of Property Owner:	Date:
Signature of Property Owner:	Date:
AGREEMENT TO PAY ALL APPLICA	ATION FEES AND EXPENSES:
We the applicant and undersigned property owner certified check, for deposit in an escrow fund, the amall fees and estimated future Town administrative, in processing this request. If the escrow amount is crequested by the Town within 10 days of such requestrom this escrow fund shall be returned to me, without Township have been satisfied. All fees and expense or denied.	ount of \$ as partial payment for planning, legal and engineering fees incurred depleted, I agree to furnish additional monies as est. I understand that any amounts not utilized out interest, when all financial obligations to the
I understand and agree that all Township-incurred prothe processing of this request and enforcing the terms attorney's fees are my responsibility as the property obilling by the Town in the event the escrow fund is de the property owner I must make said payment within 1 within the 10 days of request for payment by the Town year. Further, if I fail to pay said amounts when due, that any property owned by me within the Township limits take necessary legal action to recover such costs and attorney's fees and other costs incurred by the Town a voluntarily waive all rights to appeal said certification of any applicable Minnesota Statutes.	s of this agreement including, but not limited to, owner and will be promptly paid by me upon pleted. I further understand and agree that as 10 days of the date of the invoice. Bills not paid a shall accrue interest at the rate of 6% per then the Town may certify such costs against for collection with the real estate taxes and/or I agree that the Township shall be entitled to as a result of such legal action. I knowingly and
Applicant:	Date:
Property Owner:	Date:
Property Owner:	Date: