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# ***RAVENNA TOWNSHIP***

20425 Red Wing Blvd. Hastings, MN 55033 Phone: 651/480-1902  
e-mail: [clerk@ravennatownshipmn.com](mailto:clerk@ravennatownshipmn.com) Website: [www.ravennatownship.org](http://www.ravennatownship.org)

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## **Conditional Use Permit Application**

Please return this completed registration form and payment on or before the Friday preceding the Town Board Meeting to the town clerk at:

Ravenna Township  
20425 Red Wing Blvd.  
Hastings, MN 55033

### **For Township use only:**

Date received: \_\_\_\_\_

Registration fee paid: \_\_\_\_\_

Escrow fee paid: \_\_\_\_\_

**\$570.00 is due with application. An escrow may be required.**

### **Please Print or Type All Information**

**Applicant:** \_\_\_\_\_  
Last Name First Home Phone Work Phone

Street Address City State Zip

**Owner** (If different than applicant) \_\_\_\_\_

**Note:** If owner is different from applicant, a statement authorizing or supporting this application must be obtained from the landowner and included in this application.

**Parcel Identification Number(s):** 33- \_\_\_\_\_ - \_\_\_\_ - \_\_\_\_\_  
33- \_\_\_\_\_ - \_\_\_\_ - \_\_\_\_\_

**Legal Description of Property:** \_\_\_\_\_

**Street Address of Site:** \_\_\_\_\_

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Provide the name and mailing address of all property owners of record, according to the county auditor's property tax records, contiguous to the property to which the application relates: (attach extra pages as necessary to cover all properties)

_____	_____
_____	_____
_____	_____
_____	_____

Describe the proposed use including, to the extent applicable, hours of operation, parking, anticipated traffic and routes, lighting plans, identification and explanation of any potential sources of significant noise, dust, vibration, other impacts reasonably anticipated to be generated by the proposed use which could affect surrounding properties: (attach extra pages as necessary to cover all details)

_____
_____
_____
_____
_____
_____
_____
_____

**AGREEMENT:** I hereby certify that the information contained herein is true and correct, and if registration is granted, agree to do the proposed work in accordance with the description above set forth and according to the provisions of the ordinances of Ravenna Township, Dakota County, Minnesota.

I agree that any plans and specifications submitted herewith shall become part of this Conditional Use Permit.

I further agree to pay the **application fee** to the Township regarding the registration of this business and it is non-refundable. I understand an escrow fee may be required to cover the Township's out-of-pocket expenses caused by the review of the application. Any unexpended escrow funds will be returned.

Dated: \_\_\_\_\_ Signature of Applicant: \_\_\_\_\_

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## **SITE MAP**

Use a Dakota County GIS map with a scale large enough to clearly show the following information: location and dimension of property and buildings/structures on the property; the distance of buildings/structures from the boundaries of property; location of easements; underground utilities; septic tanks, tile fields and water wells; location where a 2<sup>nd</sup> septic system may be placed; any additional information as the Township may reasonably require.