AP

APPEAL FORM

Dakota County Shoreland Zoning and Floodplain Management Ordinance

Dakota County Water Resources Dept.
Western Service Center
14955 Galaxie Avenue
Apple Valley, MN 55124
Telephone: (952) 891-7000

FOR OFFICE USE ONLY
File:_____
Received:_____
Permit Fee Paid:_____
ISTS Status:_____

Note: For an application to be processed, Sections A, B, C, and D must be completed in full. Incomplete applications may be returned to the applicant by the Zoning Administrator for completion.

Section A

Property Owner:_____
(Last Name) (First Name) (Middle Initial)

Address:_____
(Street Address or P.O. Box) (City) (State) (Zip Code)

Telephone:_____
(Home) (Work)

Site Address:_____
(Street Address or P.O. Box) (City) (State) (Zip Code)

Township Name:_____ Property Identification number (PIN):_____
(If unsure, see your tax statement)

Name of Lake, River, or Stream:_____

Appellant: (if different than owner listed above):

_____
(Name) (Street Address or P.O. Box) (City) (State) (Zip Code)

Section B

1. What order, requirement, decision or determination is being appealed?_____

2. Explain the reasons for your appeal and provide any evidence that you believe will support it (use extra sheets if necessary).

Section C

Required Site Plan

To evaluate your permit request, provide as much information as possible, such as maps, plans, etc. Create a detailed site plan with the following information that applies. (Contact the Zoning Administrator if you have any questions.)

Basic Elements	Existing Features	Proposed Changes
• Date of preparation • Scale • North arrow • Property lines/boundary • Property dimensions	• Existing structures • Existing driveways, roads, trails • Existing well/septic system • Adjacent roads • Length of shoreline frontage • Ponds, lake rivers, streams • Existing vegetation • Steep slopes • Drainage patterns • Right-of-ways • Easements	• New structures • Fences • Landscaping • Roads/driveways • Grading-areas of cut and fill • Distance of structures to lot lines • Septic system • Well • Other (explain)

All items listed must be present before approval of permit application unless waived by the Dakota County Water Resources Office

Appeal Form Checklist

___ Completed and signed application

___ Detailed Site Plan

___ $444.00 check payable to the Dakota County Treasure (**NON-REFUNDABLE**)

Agreement:
I hereby certify that the above information is true and correct.

Signature:_____ Date:_____