

# MARSHAN TOWNSHIP

Mailing Address: Marjory Snyder, Clerk, 19980 Nicolai Ave. E. Hastings, MN. 55033  
**Mineral Extraction Interim Use Permit Application Form #\_\_\_\_\_**

**Planning Commission meets the 1st Tuesday of each month at 8:00 P.M. at the Town Hall.**  
**Town Board meets the 3rd Tuesday of each month at 8:00 P.M. at the Town Hall.**  
**Town Hall Address: 19497 - 205th Street, Hastings, MN. 55033**

**Application Fees:**

**\$600.00 Non-refundable Application Fee**  
**\$3000.00 Consulting Escrow Fee**  
**\$3600.00 Total Application Payment Due**

**Property Location:**

Parcel I.D.: \_\_\_\_\_  
Section: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
Property Owner: \_\_\_\_\_  
Attach Legal Description

**Applicant:**

Name: \_\_\_\_\_  
Street: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone \_\_\_\_\_  
Day: \_\_\_\_\_  
Evening: \_\_\_\_\_

**Documentation: See section 824 of the Marshan Township Zoning Ordinance for Submittal Requirements.**

**Agreement:**

I am the property owner or authorized representative of the property owner for the above proposed action. I understand that there may be property descriptions, property surveys, site plans, building plans, and other information that may be required for submittal in duplicate form before the application is accepted and the public hearing is set. I understand that the application fee is non-refundable. I understand the consulting escrow fee is required to cover the Township's out-of-pocket expenses caused by the review of the application. I understand that this is an escrow only and full payment for consulting fees in excess of the escrow will be required prior to the issuance of any permits or final action on the request. Any unexpended escrow funds will be refunded.

**Signature of applicant:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**Signature of property owner, if different:** \_\_\_\_\_ **Date:** \_\_\_\_\_

_____ <b>Date Application Received</b>	<b>Signature:</b> _____
_____ <b>Date Application Complete</b>	<b>Signature:</b> _____
_____ <b>Date Payment Received</b>	<b>Signature:</b> _____
_____ <b>Date Public Hearing Set</b>	<b>Signature:</b> _____

**Planning Commission Action:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
**Town Board Action:** \_\_\_\_\_ **Date:** \_\_\_\_\_