

INTERIM USE PERMIT APPLICATION

Becker Township
PO Box 248
12165 Hancock Street
Becker, MN 55308

www.beckertownship.org

763-261-5301



Date Received _____

Hearing Date _____

Fee – \$325 application/\$1,000 Escrow

Date Paid: _____

Check Number: _____

Date Application Received: _____

Date Application Complete: _____

Above for Office Use Only

=====

OWNER _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ FAX _____

EMAIL _____

APPLICANT (if different than owner) _____

ADDRESS _____ PHONE _____

EMAIL _____

SURVEYOR (if applicable) _____

PHONE _____ EMAIL _____

LOCATION OF AFFECTED PROPERTY:
STREET ADDRESS _____

LEGAL DESCRIPTION OF PROPERTY (attach a separate document if necessary):

PRESENT ZONING Agriculture Districts General Rural Commercial
 Neighborhood Comme. Industrial 1 Industrial 2

which may include a recommendation to impose necessary conditions and safeguards on to the permit where they deem as necessary.

Notice of the Public Hearing shall be publicized in the official paper and notice shall be mailed to each owner of property situated wholly or partly within 500 feet of the property to which the interim use is related at least ten (10) days prior to the Meeting. The Town of Becker shall be responsible for mailing such notices.

I HEREBY CERTIFY that I have no delinquent property taxes, special assessments, penalties, or interest due on the parcel to which the application relates. I am also aware that the property taxes which are being paid under the provisions of a court order or which are in the process of being appealed are not considered delinquent for purposes of this law if all payments under the terms of the order or appeal have been paid.

I FURTHER CERTIFY that if I am in violation of this requirement, the Town of Becker may deny the permit application by law.

I HEREBY STATE that all of the information stated in this application is true and accurate to the best of my knowledge.

Signature of Applicant

Date

Signature of Owner (s)

Date