

ENVIRONMENTAL SERVICES 105 SOUTH 5TH STREET, SUITE 311, OLIVIA, MN 56277 PHONE: 320-523-3768 FAX: 320-523-3843 WEBSITE: www.renvillecountymn.gov EMAIL: es@renvillecountymn.gov

LAND USE PERMIT APPLICATION

Property ID #	Date Submitted		
Name of Applicant	Phone No. ()		
Applicant Address	City	State	Zip
Applicant E-mail Address			
Property Owner			
Property Address	City	State	Zip
Property Owner E-mail Address			
Section	Township		
What do you propose to construct?			
Structure Dimensions	Structure Height		
What is the proposed use of the structure?			
Is the proposed construction for personal use only?	Yes	No	
Is the proposed construction for commercial use?	Yes	No	
If yes, what type of business?			
Have you started the proposed construction?	Yes	No	
Name of General Contractor	License #		
Will the structure contain water-using devices?	Yes	No	
Is there an existing septic system located on site?	Yes	No	
If yes, do you have a "Certificate of Compliance"?	Yes	No	Unknown
Name of Septic System Contractor			
The undersigned certifies that all information submitted any plans and information submitted shall become a pa	is correct. The u	undersigned fur	
Name	Date		
NOTICE: Random site visits are performed to check the placeme	ent of the proposed	structure(s)andth	e use of the property.
OFFICE USE: Date Paid Check Number	_ Cash Cred	lit Card	

SITE MAP

The purpose of the site map is to graphically illustrate the information included in your application. Please include the dimensions of all newly proposed structures. The following applicable items must be included on the Site Map:



** Incomplete applications will be returned. **



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ABATEMENT OF ENVIRONMENTAL HAZARDS SURVEY

Chapter Two (Zoning Regulations), Part 3, Section 1.3.F., of the Renville County Land Use Ordinance states that no permit can be approved until all known environmental hazards situated on the property have been abated and/or permitted in a manner prescribed by law.

Please complete the following Survey to determine if we can help you remove any environmental hazards that may currently exist on your property.

CAISU	niyou property.
1.	Does the property have any unused or improperly sealed wells, cisterns, pits, tanks, and similar hazards?
	YES NO
	If yes, please list:
2.	Does the property have any unapproved storage of solid waste and/or demolition landfill waste?
	YES NO
	If yes, please list:
3.	Does the property contain any discarded appliances and electronic devices?
	YES NO
	If yes, please list:
4.	Does the property have any unapproved storage or abandonment of inoperative or unlicensed motor vehicles, heavy equipment and farm implements, combustion engines and parts?
	YES NO
	If yes, please list:
5.	Does the property have any unapproved storage of chemicals; explosives; and radioactive, infectious, or hazardous waste o material?
	YESNO
	If yes, please list:
6.	Does the property have any abandoned, dilapidated, or burned-out structures?
	YESNO
	If yes, please list:
7.	Does the property have any other uses similar to those listed above?
	YES NO
lt	f yes, please list:
The u	ndersigned owner of the property certifies that the above information is accurate.
