



SYLVAN TOWNSHIP
HOME OCCUPATION A or B APPLICATION

SYLVAN TOWNSHIP
COUNTY OF CASS
STATE OF MINNESOTA
12956 24TH AVE SW
PILLAGER, MN 56473
PHONE: 218-746-3652
FAX: 218-746-3612

For Office Use Only

Received by: _____

Fee Paid: _____

Base Fee: _____

Date Received: _____

Date Deemed Complete: _____

Date On-Site Inspection Made: _____

Date Final Inspection: _____

TYPE OF APPLICATION

Home Occupation Type A

Home Occupation Type B

PROPERTY INFORMATION

Street Address:

Property Identification Number (PIN#):

Legal Description (Attach if necessary):

OWNER INFORMATION

Name:

Business Name:

Address:

City:

State:

Zip Code:

Telephone:

Fax:

E-mail:

Contact:

Title:

Telephone:

Fax:

E-mail:

Site Plan

Sketch buildings, roads, property lines, parking, etc. on plan. If there is outside storage show location on plan. Indicate any screening that will be provided. Indicate on plan where business will be operated.

Note: If a new accessory building is required for this business it must be permitted by Cass County for use as part of the Home Business or Home Occupation. The accessory building may not exceed 2,000 feet.

APPLICATION FEES AND EXPENSES: By signing this application form, I agree that all fees and expenses incurred by the Township for the processing of this application, including costs for professional services, are the responsibility of the property owner to be paid immediately upon receipt or the Township may approve a special assessment for which the property owner specifically agrees to be assessed for 100 percent per annum and waives any and all appeals under Minnesota Statutes 429.81 as amended. All fees and expenses are due whether the application is approved or denied or withdrawn. Escrow fees may not cover actual expenses; any additional fees will be billed.

I, the undersigned, hereby apply for the considerations described above and declare that the information and materials submitted in support of this application are in compliance with adopted County/Township policy and ordinance requirements are complete to the best of my knowledge. I further understand that this application will be processed in accordance with established County/Township review procedures and Minnesota Statutes 15.99 as amended, at such time as it is determined to be complete. Pursuant to Minnesota Statutes 15.99, the Township will notify the applicant within fifteen (15) days from the filing date of any incomplete or other information necessary to complete the application. Failure on my part to supply all necessary information as requested by the County/Township may be cause for denying this application.

The applicant hereby makes application for a development permit as specific above and agrees to do all work in strict accordance with all Cass County and Sylvan Township, Minnesota ordinances. The applicant agrees that all plot plans, sketches, and specifications submitted herewith, and which are approved by the Township shall become part of the permit. The applicant further agrees to grant permission to Sylvan Township or Cass County Environmental Services Department personnel to enter the applicant's premises at reasonable times during the application process and thereafter to make necessary inspections or to subsequently check for compliance with permit conditions or other applicable County or State ordinances.

THE APPLICANT UNDERSTANDS THAT IT IS THE APPLICANT'S SOLE RESPONSIBILITY TO OBTAIN ALL OTHER FEDERAL, STATE, OR LOCAL AGENCY PERMITS WHICH MAY APPLY TO THE ABOVE DESCRIBED PROJECT.

Applicant: _____ Date: _____

Owner: _____ Date: _____

NOTE: Applications must be signed by all property owners. Applications only accepted with **ALL required support documents and fees.** See Home Occupation Application Checklist and SCO Ordinance.