

CITY OF AVON
140 STRATFORD ST E
P O BOX 69
AVON MN 56310

320-356-7922
320-356-2259 FAX

NO PERMIT (BUILDING OR ZONING) WILL BE ISSUED THE SAME DAY. PROCESSING OF AN APPLICATION COULD TAKE UP TO 10 DAYS.

OFFICE HOURS FOR AMY PEASE
ZONING/BUILDING PERMITS
MONDAY-THURSDAY 7:30A-3:30P
AMY.P@CITYOFAVONMN.COM

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City of Avon - Zoning Permit Application

\$35 Fee

Application No.	File Date: ____/____/____	Fee Paid: \$
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Legal Description:

Parcel ID: _____ Zoning Classification: _____

Street Address of Property: _____

Property Owner(s): _____

Property Owner(s) Address _____ Phone: _____
(if different from above):

Current Use of Property: _____

Type of Request: Sign Illuminated? Shed Fencing
Other: Description _____

Describe in detail work to be done:

Size of project: Length _____ Width _____ Sq. Ft. _____ Height _____

Type of construction materials to be used: _____

- All or part of the following information (if applicable) is required with the application:
- Site plan drawn to scale showing actual size and shape of parcel and proposed project dimensions
 - All existing signs on the property and their respective locations with dimensions, setbacks and height noted (including window signs)
 - Specifications for proposed sign(s)
 - Location of all structures and their square footage
 - Public right of ways, sidewalks, curb cuts, driveways, parking, access roads, wetlands, flood plain, easement, etc
 - Landscaping and screening plans
 - Drainage plans
 - Other: _____

I hereby certify that I have read and examined this application and supporting documents and know the same to be true and correct. I have identified all property boundaries, easements, flood zones and/or wetlands, existing on the property on my site plan(s) and application. The undersigned further agrees that the city and its administrative staff relied on the accurateness of this application, plans and specifications relative to this request and hold the City of Avon harmless from all liability arising from the granting of a permit.

Signature of Applicant: _____ Date: ____/____/____

Signature of Zoning Administrator: _____ Date: ____/____/____

Notes/Restrictions: _____



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In order to obtain a building permit for any construction in residential (R-1) zoning in the City of Avon, you will need to comply with the City of Avon's Ordinance No. 148 regarding maximum Lot Coverage. Any property that is outside of the 1,000 square feet of lakeshore must follow the 50% maximum impervious surface coverage. Any property within 1,000 square feet of lakeshore must follow the 25% maximum impervious surface coverage. Please complete the form below:

- _____ Total Square Feet of Lot.
- _____ Total Square Feet of House (include any porches, overhangs, etc.)
- _____ Total Square Feet of Garage (include any overhangs).
- _____ Total Square Feet of Driveway and Sidewalks.
- _____ Total Square feet of Existing Dog Kennels, Patios, Shed, Decks (any area that water cannot saturate through).
- _____ Total Square Feet of FUTURE Dog Kennels, Patios, Sheds, Decks (any area that water cannot saturate through) that are not included on this building permit.

***Please make sure the site plan shows where the structures are situated on the lot and all four setbacks. Also, please provide dimensions for all structures.**

AGREEMENT

I, _____, the undersigned, accepts this agreement with the understanding that all information is true and correct. I do understand that I am responsible for submitting the correct information regarding dimensions and square footage to the City of Avon to request a building permit and I understand the maximum impervious surface coverage is 25% for shoreland and 50% for non-shoreland.

If any information is deemed incorrect, the Permit will be null/void and thus the project will be considered in violation of Ordinance and punishable as stated within the ordinance.

I HAVE CAREFULLY READ THIS AGREEMENT AND FULLY UNDERSTAND ITS CONTENTS. I SIGN IT OF MY OWN FREE WILL.

Date: _____
Property Owner

PROPERTY DISCLAIMER

The undersigned is the owner of record or the Builder of the following property located within the City of Avon, Stearns County, Minnesota, whose address is: _____; that as part of the process of obtaining a building/zoning permit, the undersigned certifies that all of the information in the application, plans and specifications are true and correct.

It is the responsibility of the undersigned to identify all property boundaries, all easements, all underground utilities (including sewer and water lines) and/or wetlands existing on the subject property and has identified them on his/her site plan and application.

The undersigned further agrees the City of Avon, and its' administrative staff and agents relied on the accurateness of this application, plans and specifications relative to this project and hold the City of Avon, and its employees harmless from all liability arising from the granting of this permit.

Signature of Property Owner/Builder

Date