



1245 West Highway 96  
 Arden Hills, Minnesota 55112  
 Telephone (651) 792-7800  
 Fax (651) 634-5137  
 www.cityofardenhills.org

**For Office Use Only**

Planning Case No.	19-
Submittal Date	_____
Application Completed Date	_____
Accepted by	_____
Receipt Number	_____
Council Decision	_____
Council Decision Date	_____

**2019 LAND USE APPLICATION**

**Applicant Information**

Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone No.: \_\_\_\_\_ Other: \_\_\_\_\_

Fax No.: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Property Information**

Property Owner: \_\_\_\_\_

Owner Address: \_\_\_\_\_

Owner Telephone No. \_\_\_\_\_ Other: \_\_\_\_\_

Address of Property Involved: \_\_\_\_\_

Legal Description: \_\_\_\_\_

Property ID No.: \_\_\_\_\_

Type of Use: \_\_\_\_\_

Zone: \_\_\_\_\_ Property Acreage: \_\_\_\_\_

**Type of Request**

- Comprehensive Plan Amendment (Fee: \$500 + Escrow: \$1,000)
- Conditional Use or Interim Use Permit/CUP or IUP Amendment (Fee: \$350 + Escrow: \$1,000)
- Preliminary Plat (Fee: \$500 + Escrow: \$1,000)
- Final Plat (Fee: \$500 + Escrow: \$1,000)
- Concept Plan Review (Fee: \$150 + Escrow: \$1,000)
- Master Planned Unit Development or Master Special Development Plan (Fee: \$350 + Escrow: \$1,000)
- Final Planned Unit Development or Final Special Development Plan (Fee: \$350 + Escrow: \$1,000)
- Planned Unit Development Amendment or Special Development Plan Amendment (Fee: \$350 + Escrow: \$1,000)
- Site Plan Review (Fee: \$350 + Escrow: \$1,000)
- Rezoning or TCAAP Regulating Plan Amendment (Fee: \$350 + Escrow: \$1,000)
- Zoning Code or TCAAP Redevelopment Code Amendment (Fee: \$350 + Escrow: \$1,000)
- City Code Amendment (Fee: \$350 + Escrow: \$1,000)
- Lot Split/Minor Subdivision (R-1 and R-2 Districts Only) (Fee: \$350 + Escrow: \$1,000)
- Variance or Permitted Adjustment (Fee: \$350 + Escrow: \$1,000)
- Vacation of Easement or Right-of-Way (Fee: \$150 + Escrow: \$1,000)
- Appeal of Administrative Decision (Fee: \$150 + Escrow: \$1,000)
- Land Use Requests – Not Already Specified (Fee: \$150 + Escrow: \$1,000)

Brief Description of Request (please also include a typed, detailed letter explaining the project):


**\*IMPORTANT\***

- Certain applications are subject to review and approval by the Rice Creek Watershed District. Contact RCWD directly at 763-398-3070 for additional information.
- The land use application fees do not cover building, sign, or other permit fees that may be required upon approval of a land use application.
- All applications will be subject to additional fees for reimbursement of consultant costs associated with filing, reviewing, and processing of application in the form of an escrow to the City.

**Filing & Information Requirements**

The City requests that you make a pre-application meeting with the City Planner to discuss the application process, requirements, and deadlines. Unless waived by the City Planner or Planning Commission, a certified survey of the property is required for all applications. A checklist with additional application requirements can be found at [www.cityofardenhills.org/landuseapplications](http://www.cityofardenhills.org/landuseapplications).

**Complete/Incomplete Applications**

Under Minnesota Statute, Chapter 15.99, cities have 15 business days to review all plans and application materials to ensure they satisfy City requirements. During the 15 day review period, City staff will provide written comments on the application and may request plan revisions. If the application is determined to be complete, Minnesota State Statute then requires the City to approve or deny the application within 60 days, up to 120 days. If not complete, the City may require plan revisions and/or additional information before the application is scheduled for Planning Commission review and/or City Council action.

**Payment of Fees and Escrows**

The undersigned acknowledges that she/he understands that before a land use application can be deemed complete, all required fees and escrows must be paid to the City. Each separate land use request shall be charged a separate administrative fee and escrow even if submitted on the same application. Costs expended in reviewing and processing an application will be charged against the cash escrow and credited to the City. Charges to the escrow may include planning and engineering staff time, City Attorney and consulting fees, and mailing costs. If, at any time, a required cash escrow is depleted to less than 20 percent of its original amount, the applicant shall deposit additional funds in the cash escrow account as determined by the City. The City may withhold final action on a land use application, withhold building permits, and/or rescind prior action until all fees have been paid. Unused portions of an escrow are returned to the applicant upon successful implementation of an approved plan. The escrow may be reduced or increased by the City Planner on a project by project basis.

**Notice of Meeting Attendance**

In order for the Planning Commission and the City Council to consider any application, the applicant or a designated representative must be present at the scheduled meeting. If not, the matter may be tabled until the next available agenda.

**Agenda Deadline and Meeting Schedule**

The deadline for submittal of land use applications is required according to the schedule outlined below. There are **no exceptions**. Failure to submit all application materials by the deadline date will delay the review process. Planning Commission meetings are typically held on the first Wednesday after the first Monday of each month at 6:30 PM, though please contact City Hall to verify the meeting date and time. City Council meetings are held typically the last Monday of the same month at 7:00 PM. Meetings are held in the Council Chambers at the City of Arden Hills, 1245 West Highway 96, Arden Hills, Minnesota 55112, unless otherwise stated. Applicants are advised that additional meetings and/or workshops are scheduled when necessary upon approval of the Planning Commission.

**2019 SCHEDULE (\*subject to change)**

<b>APPLICATION DEADLINE DATE*</b>	<b>TENTATIVE PLANNING COMMISSION MEETING DATE*</b> (Generally held on the first Wednesday after the first Monday at 6:30 p.m.)	<b>TENTATIVE CITY COUNCIL MEETING DATE*</b> (Generally held on the fourth Monday at 7:00 p.m.)
<b>December 3 (2018)</b>	January 9	January 28
<b>January 2</b>	February 6	February 25
<b>February 4</b>	March 6	March 25
<b>March 4</b>	April 3	April 22
<b>April 1</b>	May 8	May 28
<b>May 6</b>	June 5	June 24
<b>June 3</b>	July 10	July 22
<b>July 1</b>	August 7	August 26
<b>August 5</b>	September 4	September 23
<b>September 3</b>	October 9	October 28
<b>October 1</b>	November 6	November 25
<b>November 4</b>	December 4	January 14 (2020)
<b>December 2</b>	January 8 (2020)	January 27 (2020)

**Acknowledgement and Signature**

I acknowledge that I have read all of the information listed in the City of Arden Hills Land Use Application and fully understand that I am responsible for all costs incurred by the City related to the processing of this application.

\_\_\_\_\_  
Property Owner Signature (Required)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant Signature (If different than the property owner)

\_\_\_\_\_  
Date

Please contact the City Planner at 651-792-7800 if you have any questions regarding this application.

Additional copies of this application form are available on the City's website: [www.cityofardenhills.org/landuseapplications](http://www.cityofardenhills.org/landuseapplications)



**Escrow Account Set Up Form**

Date: \_\_\_\_\_

Site Address: \_\_\_\_\_

Deposit made by: \_\_\_\_\_

Amount: \$ \_\_\_\_\_

Address to send statements: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Telephone No.: \_\_\_\_\_ Email Address: \_\_\_\_\_

Purpose of Escrow Account: \_\_\_\_\_

Arden Hills Finance Department policy requires that escrow deposits be held for six months once a permit has been closed in order to ensure all costs associated with the project have been covered. Please note: Land Use Applications may be required to maintain a minimum balance as established by the City, and will require replenishment when balances fall below the minimum balance. I acknowledge that I have read this policy and fully understand that any remaining escrow balance will be released after a six-month waiting period.

\_\_\_\_\_  
Applicant Signature Date

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**Office Use Only**

Staff Name: \_\_\_\_\_ Department: \_\_\_\_\_

Type of Escrow:

- |   |   |
|---|---|
| <input type="checkbox"/> Landscaping                      | <input type="checkbox"/> Land Use Application (PC# _____)   |
| <input type="checkbox"/> Grading & Erosion (PW# _____)    | <input type="checkbox"/> Temporary Certificate of Occupancy |
| <input type="checkbox"/> Site Improvements (PW# _____)    | <input type="checkbox"/> Other: _____                       |
| <input type="checkbox"/> Security Deposit – Do Not Charge |   |

Additional Notes: \_\_\_\_\_