

Application # \_\_\_\_\_

Application Date \_\_\_\_\_



**CITY OF ROSEAU, MINNESOTA**

121 Center Street East, Suite 202; P.O. Box 307; Roseau, MN 56751  
Phone: (218) 463-5003 FAX: (218) 463-1252 e-mail: tpetersn@mncable.net

**PETITION FOR AMENDMENT OF ZONING ORDINANCE OR MAP**

**PETITIONER**

Name \_\_\_\_\_

Address \_\_\_\_\_

Office Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

E-mail Address \_\_\_\_\_

Location of Property (Legal Description) \_\_\_\_\_

Character of Amendment: \_\_\_\_\_ change to zoning ordinance text \_\_\_\_\_ change to zoning map

Description of Proposed Change: \_\_\_\_\_

Attach to this form a map showing property locations, shapes, and dimensions of existing and proposed buildings, all streets and roads, north direction and any other information pertinent to this petition.

BY \_\_\_\_\_  
(Signature of Petitioner)

Date \_\_\_\_\_

Fee Paid (\$75)

Date \_\_\_\_\_

**PETITION APPROVAL CITY OF ROSEAU**

Official Publication of Public Hearing

Date \_\_\_\_\_

Amendment \_\_ adopted \_\_\_\_ rejected by Council

Date \_\_\_\_\_

BY \_\_\_\_\_  
(Signature of Authorized City Representative)

Title \_\_\_\_\_

Date \_\_\_\_\_