



**Greater Bemidji Area  
Joint Planning Board**

**Application for Rezoning / Zoning Ordinance  
Amendment**

Please complete this application carefully and completely.  
PLEASE PRINT. Failure to fill in all of the required information may  
result in a delay of processing your application.

A fee of \$ \_\_\_\_\_ made payable to the **City of Bemidji**  
must accompany this application. Additional escrow or  
verification fees may apply for approved projects.

An escrow of \$ \_\_\_\_\_ made payable to the **City of Bemidji** must accompany this application. Additional  
escrow or verification fees may apply for approved projects.

An escrow account is established as indicated above to cover technical and legal expenses incurred by the Joint Planning Board (JPB) as  
part of the plan review. The applicant is responsible for all costs incurred by the JPB during plan review. If the escrow amount drops  
below 10% of the original deposit amount the JPB may require submittal of an additional escrow deposit sufficient to cover any  
anticipated expenses. Upon determination by the JPB that the project is complete or expired, the JPB will return the remaining escrow  
deposit to the applicant.

<b>OFFICE USE ONLY</b>	
Complete Application Rec'd	_____
Payment Rec'd	_____
Field Checked	_____
Zoning District	_____
Date Permitted	_____
Permit Number	_____
Comments	_____

**APPLICANT DATA**

NAME OF APPLICANT:	_____	EMAIL:	_____
MAILING ADDRESS:	_____		
SITE ADDRESS:	_____	PARCEL:	_____
PHONE NUMBER: WORK	_____	HOME	_____

**OFFICE USE ONLY**

Property Dimensions: Width \_\_\_\_\_ft    Depth \_\_\_\_\_ft    Total area \_\_\_\_\_ sq ft/acres

Is there one acre of contiguous land on the property?  Yes  No

Have there been any Variances/Use Permits granted on this property?  Yes  No  Don't Know  Attach copies

Is property within 1000 feet of a public water?  Yes  No    Is property in an airport zone?  Yes  No

Septic Data: Year Installed: \_\_\_\_\_ Last Compliance Inspection: \_\_\_\_\_

Pass Compliance     Fail Compliance     Notarized Stipulation     Other \_\_\_\_\_

Municipal Services: Water  Yes  No    Sewer:  Yes  No    If no, is hook up possible?  Yes  No

**PROPOSAL (Use additional sheets if necessary)**

Rezone \_\_\_\_\_ District to \_\_\_\_\_ District

Amend Zoning Ordinance Text?  Yes  No If Yes, explain proposed amendment: \_\_\_\_\_

Describe the proposed use of your property (be specific): \_\_\_\_\_

Describe the existing use of your property: \_\_\_\_\_

Is the proposed amendment made necessary because of changes or changing conditions in the area affected?  Yes  No

If yes, what is the nature of such changes or changing conditions? \_\_\_\_\_

How will the area be directly affected by the proposed changed? \_\_\_\_\_

What are the zoning districts immediately adjacent to all sides of the property to be rezoned? \_\_\_\_\_

Are there easements across the property to be rezoned?  Yes  No What are they? \_\_\_\_\_

Do adequate sewer and water facilities, and all other needed public services, exist or can they be provided to serve the uses that would be permitted on the property if it were reclassified? \_\_\_\_\_

Will the proposed amendment correct an error in the application of this Ordinance?  Yes  No Describe \_\_\_\_\_

Are there any reasons, not addressed above, that would help to determine if your proposal should be granted? \_\_\_\_\_

**ALL APPLICANTS MUST SIGN BELOW**

I hereby certify that I am the owner or authorized agent of the owner of the above described property and that all uses will conform to the provisions of the Greater Bemidji Area Zoning and Subdivision Regulations. I further certify that I will comply with all conditions placed upon this permit should this application be approved. Intentional or unintentional falsification of this application or any attachments thereto will serve to make this application and any resultant permit invalid. I also authorize Greater Bemidji Area Joint Planning staff to inspect the property during review of this application and subsequent construction during reasonable times of the day.

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

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

**OFFICE USE ONLY**

Reviewed by \_\_\_\_\_ Date \_\_\_\_\_ Complete Application  Yes  No

**COMPLETED FORMS CAN BE SUBMITTED AT CITY HALL, 317 4<sup>TH</sup> STREET NW, LOWER LEVEL**



# Greater Bemidji Area Joint Planning Board

City of Bemidji Northern Township

317 4<sup>th</sup> Street NW Bemidji, MN 56601 Office (218) 759-3579 Fax (218) 759-3591

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## **ZONING AMENDMENT APPLICATION CHECKLIST**

1.    \_\_\_    **Complete application including:**
  - a.    Proof of ownership/standing
  - b.    Complete legal description of all parcels from title/deed
  - c.    Application filled out in complete detail including all signatures
  - d.    Application fee
  
2.    \_\_\_    **A written summary of the request summarizing:**
  - a.    A summary of the current JPB Land Use designation for the property
  - b.    Why the property cannot be adequately used under current zoning
  - c.    What factors have changed in the area prompting the change
  - d.    How the change will benefit the surrounding area and Greater Bemidji Area over time
  - e.    Proposed use of property after rezone (if applicable)
  
3.    \_\_\_    **All other documentation required by staff at time of application**