

LE SUEUR COUNTY LAND ALTERATION PERMIT

Non-Shoreland Land Alterations

ENVIRONMENTAL SERVICES

Address: 88 S. Park Avenue, Le Center, MN 56057

Phone: 507-357-8538

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Le Sueur County
ENVIRONMENTAL
SERVICES

For Office Use Only

Permit #: _____

_____*Approved*

Fee: _____

_____*Denied*

Receipt #: _____

_____*Incomplete*

Payment Type: _____

_____*Moved to Zoning Process*

By: _____ (Signature)

Date: _____

Date: _____ Parcel ID Number: _____

Applicant Information

Applicant: Last Name: _____ First Name: _____

Phone: _____ E-mail: _____

Mailing Address: _____ City, State, & Zip: _____

Site Address: _____ City, State, & Zip: _____

If you are not the property owner, please include property owner's information:

Last Name: _____ First Name: _____

Phone: _____ E-mail: _____

Mailing Address: _____

Project Information and Location

Parcel ID Number: _____

Project Address: _____ City, State, & Zip: _____

Where is your project located? (check all that apply)

- Mineral Resources Overlay District
- Flood Plain Overlay District
- Airport Zoning Overlay District
- Agricultural District
- Urban/Rural Resident District
- General Business District
- General Industry District

Type of Alteration

*You only need to fill out the alteration sections that are relevant to your project(s). If you are unsure if a section needs to be filled out, please contact the Environmental Services Department.

Please check all boxes that apply to the proposed project(s):

Grading, Excavating, and Filling	Rain Garden
Vegetation	Retaining Wall
Rock Armor	Sand Blanket
Impervious Surface	Other (describe)

Grading, Excavating, and Filling Section

Please list and/or name different grading, excavating, and filling projects separately. Dimensions of projects **must** be in feet. To calculate cubic yards, multiply length by width by depth and then divide by 27. If you have multiple projects, you must list and calculate the total cubic yards of each project separately.

Any grading, excavating, and filling activities located within the Bluff require a Conditional Use Permit.

Name and Type of Project: _____

Length _____ Width _____ Depth _____ Cubic Yards _____

Name and Type of Project: _____

Length _____ Width _____ Depth _____ Cubic Yards _____

Name and Type of Project: _____

Length _____ Width _____ Depth _____ Cubic Yards _____

Material(s): _____

TOTAL CUBIC YARDS: _____

Vegetation Alteration Section

Trees are allowed to be removed if they are dead, diseased, dying, invasive, posing a safety hazard, or in connection with a permitted use. A tree is defined as at least 6 inches in diameter measured 4.5 feet off of the ground. Anything smaller is defined as brush and does not need approval to be removed. If trees are being removed, a 1:1 replacement is required. Any vegetation that is being proposed to be removed that is provided substantial screening shall be replaced.

Type of vegetation alteration(s): Remove Replace Establish

(Check all that apply)

Type: Trees Shrubs Grasses Forbs (flowering plants)

(Check all that apply)

Please either list species or include list as attachment: _____

Quantity of vegetation to be altered: _____

Project Description

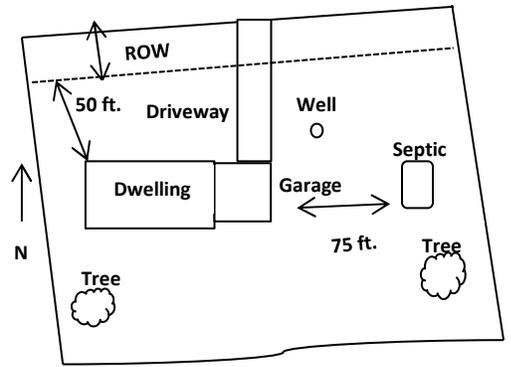
When applicable, must include: Vegetation to be cleared (what kind of vegetation, number to be cleared), vegetation replacement, erosion control plan, cubic yards of material movement (material movement: bringing in, removing, and/or moving dirt/rock/gravel/sand material), and dimensions of project (length, width, and height).

Describe in detail the proposed project and its purpose:

Describe the erosion control measures you intend to use and the location:

Project Site Sketch

Must Include: North direction, location of erosion control measures, identify bluff or steep slope, well location, septic location, and structure locations, proposed project dimensions, and vegetation alterations & replacement locations



[Empty space for drawing or additional notes]

I understand that I am responsible for the above described project. I understand that it shall follow the Le Sueur County Zoning Ordinance. I understand that straying in excess from this plan may trigger an after-the-fact violation. I also understand that by submitting this application, I am consenting to allow the Environmental Services Department to inspect and verify that all information in the application is complete and correct; and to conduct inspections before, during, and after construction and/or installation for compliance with the permit and the Le Sueur County Zoning Ordinance.

Signature: _____ Title: _____

Signature: _____ Title: _____

Date: _____