

Eureka Township

Lot Split Approval Application



OFFICE USE ONLY

Note: Completed application must be submitted to the Eureka Town Clerk by noon on the Thursday 10 days prior to the Planning Commission meeting.

| PROPERTY OWNER(S) | | | |
|-------------------|---------------|-------|-----|
| Name | Daytime Phone | | |
| Address | City | State | Zip |

AGREEMENT

The owners of the _____, request that the Eureka Town Board approve a split of the following parcels, located in Section _____ Township 113, Range 20, Dakota County, Minnesota described in the attached survey:

Parcel A, consisting of _____ acres, and having PIN# _____

Parcel B, consisting of _____ acres, **to be split from Parcel A** described above

Parcel C, consisting of _____ acres, **to be split from Parcel A** described above

Legal description of Parcel A (number, label, and attach separate sheet if necessary):

Legal description of Parcel B (number, label, and attach separate sheet if necessary):

Legal description of Parcel C (number, label, and attach separate sheet if necessary):

Property owner's signature

Date

Property owner's signature

Date

Property owner's signature

Date

DO NOT WRITE BELOW THIS LINE

Date rcvd:

Rcvd by:

Date filed with County:

Is there an existing conditional use permit (CUP) or interim use permit for uses on the affected properties? *(if yes, attach copy of CUP)*

Yes No

Has a nonconforming registration form been filed for the affected properties? *(if yes, attach copy of form)*

Yes No

APPROVALS REQUIRED (CHECK ALL THAT APPLY)

Zoning Administrator

Complete
 Incomplete

Zoning administrator signature

Date

Planning Commission

Approved
 Denied

Planning commission chair signature

Date

Town Board

Approved
 Denied

Town board chair signature

Date

FEEES

Application fee \$ _____ Paid _____

Filing fee \$ _____ Paid _____

NOTES

Lot Split Approval

Granting Eureka Town Board approval to divide a tax parcel in
Eureka Township as described herein

Drafted by Eureka Township
Dakota County, Minnesota

This _____ day of _____, 20____

**AFTER RECORDING, RETURN THIS INSTRUMENT TO
TOWN CLERK, EUREKA TOWNSHIP
AT THE ADDRESS BELOW**

Mailing Address: P.O. Box 576, Lakeville, MN 55044 • **Office:** Eureka Town Hall, 25043 Cedar Ave.
Phone: 952-469-3736 • **Fax:** 952-469-5525 • **E-mail:** eurekatn@frontiernet.net