

FEE: \$300.00 (UP TO 3 LOTS)

DATE: _____ Application taken by: _____

RECEIPT # _____ AMOUNT: _____

COPY OF SURVEY TO COUNTY SURVEYOR FOR REVIEW:
Revised 3/9/18

UNDER THE REQUIREMENTS OF THE ZONING AND SUBDIVISION ORDINANCE
OF SHERBURNE COUNTY, MINNESOTA
APPLICATION IS HEREBY MADE FOR:

REGISTERED LAND SURVEY APPLICATION:
BOUNDARY ADJUSTMENT - NO NEW LOTS BEING CREATED

1ST OWNER/APPLICANT: _____ PHONE: _____

ADDRESS: _____

EMAIL: _____ PHONE: _____

LEGAL DESCRIPTION of existing parcel: (Attach Certificate of Title, Certificate of Title Number and Survey)

ACREAGE: _____ PID #: _____

SECTION: _____ TOWNSHIP: _____ RANGE: _____

Shoreland Property: YES NO Name of Shoreland: _____

Is this a Court Order request? Yes No If so, attach a copy of the order.

ARE ANY OF THE PARCELS BEING SPLIT OR COMBINED PART OF A CONTRACT FOR DEED ? Yes No

DOES THE PARCEL BEING SPLIT HAVE A MORTGAGE ON IT ? Yes No

IF THERE IS A MORTGAGE, DO YOU HAVE THEIR APPROVAL FOR THIS SPLIT ? Yes No

- Sherburne County is not responsible for a split which has not received a partial release from the mortgage company.

2ND OWNER/APPLICANT: _____ PHONE: _____

ADDRESS: _____

EMAIL: _____ PHONE: _____

LEGAL DESCRIPTION of existing parcel: (Attach Certificate of Title, Certificate of Title Number and Survey)

ACREAGE: _____ PID #: _____

SECTION: _____ TOWNSHIP: _____ RANGE: _____

Shoreland Property: YES NO Name of Shoreland: _____

Is this a Court Order request? Yes No If so, attach a copy of the order.

ARE ANY OF THE PARCELS BEING SPLIT OR COMBINED PART OF A CONTRACT FOR DEED ? Yes No

DOES THE PARCEL BEING SPLIT HAVE A MORTGAGE ON IT ? Yes No

IF THERE IS A MORTGAGE, DO YOU HAVE THEIR APPROVAL FOR THIS SPLIT ? Yes No

- Sherburne County is not responsible for a split which has not received a partial release from the mortgage company.

EXPLANATION OF REQUEST: (explain the practical difficulties which led to the request)

SIGNATURE OF 1st APPLICANT: _____ **DATE:** _____

SIGNATURE OF 2nd APPLICANT: _____ **DATE:** _____

APPLICATION IS: APPROVED ____ DENIED ____ WITHDRAWN

ZONING ADMINISTRATION: _____ **DATE:** _____

COUNTY REGISTRAR OF TITLES: _____
DATE: _____