

RECEIVED
 SEP 21 2018
 BY: _____

Land Use Application

18-155

<input type="checkbox"/> Plat – Sketch Plan	<input type="checkbox"/> Plat – Preliminary Plat	<input type="checkbox"/> Plat – Final Plat
<input type="checkbox"/> Administrative Plat	<input type="checkbox"/> Site Plan Review	<input type="checkbox"/> Easement/ROW Vacation
<input type="checkbox"/> Conditional Use Permit	<input type="checkbox"/> Interim Use Permit	<input type="checkbox"/> Comprehensive Plan Amendment
<input checked="" type="checkbox"/> Zoning Amendment	<input type="checkbox"/> Home Occupation Permit	<input type="checkbox"/> Variance
<input type="checkbox"/> Dwelling Moving Permit	<input type="checkbox"/> Environmental Permit	<input type="checkbox"/> Registered Land Survey
<input type="checkbox"/> Non-Traditional Animal License	<input type="checkbox"/> Beekeeping License	<input type="checkbox"/> Private Kennel License

Applicant Contact Information

Please note: All official communication will be routed through this contact.

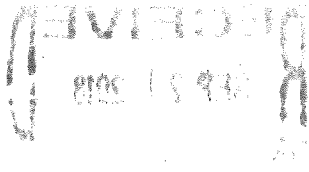
Name:	Gregory Dahlholmer		
Street Address:	17224 172nd AVE SE		
City, State, ZIP:	Big Lake MN 55309		
Home Phone:	763 263 1736	Work Phone:	763 295 3347
Email:		Fax Number:	763 295 4947
Name of Business (if applicable):	Rocky MTN INVESTMENT LLC		
Business Address (if applicable)	PO BOX 336		
Business City, State, ZIP	Monticello MN 55362		
Business Phone:	763 295 3347	Business Fax:	763 295 4947

Subject Property Information

(Location of Application)

Address	Riverdale Dr NW
PIN	35-32-25 32-0062 R00L
Legal Description	see attached
Zoning District	

Contact the Planning Division at 763-433-9824 or planning@cityoframsey.com to request a Zoning Verification



Property Owner Information
(If different than Applicant)

Name:	SAME		
Street Address:			
City, State, ZIP:			
Home Phone:		Work Phone:	
Email:		Fax Number:	

Please provide a detailed description of your request and attached a copy of a scaled site plan

Small Lot Apox 11,000 Sq Foot FIX as COMM/IND		
But zone RES. IT IS LOCATED NEXT OTHER		
business places in the area. Would like to		
change to Employee & Employer zoning		
Black smith Shop	11,000 sq. ft.	SEE ATTACHED

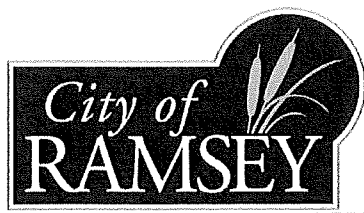
A "Land Use Sign" will be placed on the Subject Property to allow Ramsey Residents the opportunity to obtain information about your request.

Applicant Signature	<i>Gregory Dahlheim</i>	Co-Applicant Signature	<i>Joseph Dahlheim</i>
Printed Name	Gregory Dahlheim	Printed Name	Joseph Dahlheim
Title	Partner	Title	Partner
Date	9-20-18	Date	9-20-18

I understand that the application fee is non-refundable. All costs associated with the processing of this application are the responsibility of the applicant whether this application is approved or denied. Any excess of escrow account deposits over expenditures will be refunded at the time of account closure. I also understand that as the applicant, it is my responsibility to obtain all other permits or licenses required by any applicable regulatory agencies for this Land Use Application.

Property Owner Signature	<i>Gregory Dahlheim</i>	Property Owner Signature	<i>Joseph Dahlheim</i>
Printed Name	Gregory Dahlheim	Printed Name	Joseph Dahlheim
Title	Partner	Title	Partner
Date	9-20-18	Date	9-20-18

I hereby certify that I am the fee title owner/contract for deed vendee of record for the above-mentioned property. Failure to prove ownership may void any agreements entered into the City and I will be held liable for any and all costs incurred by the City.



Land Use Application

<input type="checkbox"/> Plat – Sketch Plan	<input type="checkbox"/> Plat – Preliminary Plat	<input type="checkbox"/> Plat – Final Plat
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Applicant Contact Information

Please note: All official communication will be routed through this contact.

Name:	Rocky MTN Group LLC - Country side Gordian		
Street Address:	3360 Chalkson Rd - PO Box 336		
City, State, ZIP:	Monticello MN 55362		
Home Phone:	763 263 1736	Work Phone:	763 295 3347
Email:		Fax Number:	763 295 4147
Name of Business (if applicable):			
Business Address (if applicable)			
Business City, State, ZIP			
Business Phone:		Business Fax:	

Subject Property Information

(Location of Application)

Address	Alvor Dale Drive NW Ramsey MN
PIN	35-32-25-320062
Legal Description	See Attached
Zoning District	

Contact the Planning Division at 763-433-9824 or planning@cityoframsey.com to request a Zoning Verification

Property Owner Information

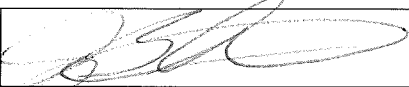
(If different than Applicant)

Name:			
Street Address:	SAME		
City, State, ZIP:			
Home Phone:		Work Phone:	
Email:		Fax Number:	

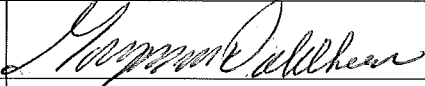
Please provide a detailed description of your request and attached a copy of a scaled site plan

<p style="font-size: 1.2em; margin: 0;">CountrySide service would like to</p>
<p style="font-size: 1.2em; margin: 0;">use this lot for outside storage</p>
<p style="font-size: 1.2em; margin: 0;">with the plan to purchase in</p>
<p style="font-size: 1.2em; margin: 0;">the near future.</p>

A "Land Use Sign" will be placed on the Subject Property to allow Ramsey Residents the opportunity to obtain information about your request.

Applicant Signature		Co-Applicant Signature	
Printed Name	Jeremy Anderson	Printed Name	
Title	Pres.	Title	
Date	11-27-18	Date	

I understand that the application fee is non-refundable. All costs associated with the processing of this application are the responsibility of the applicant whether this application is approved or denied. Any excess of escrow account deposits over expenditures will be refunded at the time of account closure. I also understand that as the applicant, it is my responsibility to obtain all other permits or licenses required by any applicable regulatory agencies for this Land Use Application.

Property Owner Signature		Property Owner Signature	
Printed Name	Gregory Dahlheim	Printed Name	
Title	Partner	Title	
Date	11-27-18	Date	

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