



VARIANCE PROCESSING AND REVIEW POLICY

In order for Todd Township to comply with Minnesota Statutes, Chapter 15.99 (processing time deadlines for agency action), these policy steps must be fulfilled before the Todd Township Zoning Administrator will accept a variance application as complete:

A. A pre-application meeting must be held between the applicant and Zoning Administrator to determine which of the following additional information items must be provided.

- A topographic survey showing 2 foot contour intervals.
- Location and size, in square feet, of all wetlands
- Location and dimensions of all structures / setbacks noted on plans
- Tier lines indicated for calculating building density
- Individual sewage treatment system site evaluation
- Individual sewage treatment system design submitted with this application
- Well Information from Department of Health
- Other:

ALL PROPOSED PROJECT PLANS MUST BE DRAWN TO SCALE AND SUBMITTED AT THE TIME OF APPLICATION.

The pre-application meeting was held on _____ (date). It was agreed that the items checked above would be required for this application to be complete.

- 1.
- 2.
- 3.

Todd Township Zoning Administrator

Date

Applicant or Agent

Date

OFFICE USE ONLY:

Date sent:
Date received:
60 Day start date: _____

FILE NUMBER:

Copies sent to: File: ____ Landowner: ____ Other: ____
60 Day stop deadline: _____



VARIANCE APPLICATION

- Warning -

Any work within TODD TOWNSHIP which requires a permit cannot be legally started until all permits are issued. Any such work done without a permit constitutes a misdemeanor punishable by fines of \$1000 and/or 90 days in jail. The Todd Township Zoning Administrator also has the authority to require restoration of any work done without a permit or beyond the work authorized by a permit and will assess double the additional application fee.

1. All items must be completed before this application will be processed.
2. A site plan must accompany each application and show the following:
 - a. The site plan must show all existing & proposed buildings, giving all dimensions.
 - b. Well and septic systems. Show the existing or future location of wells on parcel and all neighboring adjacent properties.
 - c. Driveways, roads, & highways.
 - d. Pertinent setback information, such as distances to road centerline & road right-of-way, wells, septic systems, lakes that are man made or otherwise and any potential wetlands.
 - e. State "proposed new" or "existing" on buildings, wells, and septic systems.
 - f. Physically locate and mark property lines or corner markers with stakes. Stake out areas of proposed buildings, septic system(s), and wells.
3. **Wastewater Treatment.** In conjunction with this application, a background check must be done to ensure that any Individual Sewage Treatment System (ISTS) on this property is conforming to current standards. If a non-conforming system is found, ISTS Permit must be applied from the Hubbard County Environmental Services, including a site evaluation and sewage treatment system design. The ISTS upgrade must be completed and a certificate of compliance issued within one year of the date that the system design is approved by the permitting authority.

For any sewage treatment system installation, copies of a sewage treatment system site evaluation and system design completed by a state licensed evaluator and designer must be included with this application. If this is an addition to an existing structure that could be used as an additional bedroom, a Certificate of Compliance must be obtained and submitted prior to a permit is issued. Contact Hubbard County Environmental Services (218-732-3890) for a list of Licensed Registered Professionals. **NOTE:** A Sewage Treatment System Field Evaluation must be submitted with a permit prior to any development.

4. Accurate information must be given, as permits are granted on the express conditions that the person to whom it is granted, his agent, employees and workmen shall conform in all respects to the Todd Township Zoning Ordinance. This permit may be revoked at any time upon violation of the ordinance.
5. You will be notified by mail as to the date and time of the hearing on your application.
6. The applicant is responsible for securing any other local, state, or federal permits that may be required. NOTE: If this application involves work in wetlands, additional permits and approvals will be required to comply with the Minnesota Wetlands Conservation Act and Army Corps of Engineers Regulations.
7. Once a Variance has been granted, you must apply for a Land Use Zoning & Sanitary Permit before any work commences.
8. **Completed Application.** When you have completed the application and all accompanying plans, etc., mail or deliver it to the Zoning Administrator (card attached). A fee schedule is attached and the fee must accompany each application. Make check payable to "Todd Township". For any questions, you can contact the Town Administrator at 1.218.252-1338.

I have read and fully understand the above instructions. I hereby swear that all information provided in this application is true and correct.

Applicant or Agent
Date

OFFICE USE ONLY:

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APPLICATION FOR VARIANCE

Parcel ID Number: _____

Name(s) of Applicant: _____ Date _____

Address: _____ Property Address: _____

City, State, Zip: _____

Phone: Permanent # _____ Seasonal #: _____ Cell: _____

E-Mail Address: _____

Legal Description: _____

Section _____ Twp _____ Range _____ Twp Name _____ E 911 # _____ (blue sign)

LOT INFORMATION

Year Septic System was Installed _____

Homeowner when Septic System was Installed _____

Well Size and Depth _____

Date Lot Became Lot of Record _____ Date of Ownership: _____

Lot Width at Front & Rear: Front: _____ Rear: _____

Lot Depth _____ Lot Area (ft²) _____ TOTAL ACRES _____

Minimum Sideyard _____

Road Centerline Setback _____ Right-of-Way Setback _____

Elevation at Building Setback _____ Building Line Width _____

Total Building Coverage on Lot (ft²) _____

Applicant is: () Owner () Buyer () Agent () Other

Current Use of the Property: _____

Use of Surrounding Property: _____

Section of the Ordinance from which Variance is Requested: _____

Discuss Why Variance is Needed: _____

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A variance may be granted where the strict enforcement of the Todd Township Zoning Ordinance will result in unnecessary "hardship". Whether a hardship exists will be determined by the following criteria. Please summarize facts as they relate to your property with regard to these 5 factors:

1. Can the property in question be put to a reasonable use if used under the conditions allowed by the official controls?

2. Is the plight of the landowner is due to circumstances unique to the property not created by the landowner?

3. Will the variance, if granted, alter the essential character of the locality?

4. Is the need for the variance justified by more than economic considerations alone?

5. For existing developments, is there a conforming sewage treatment system present for the intended use of the property? _____

The undersigned applicant hereby makes application for a variance as specified above, and agrees to do all work in strict accordance with all Todd Township, Hubbard County, Minnesota, and all Ordinances. The applicant agrees that all plot plans, sketches, and specifications submitted herewith and which are approved by the Todd Township Board of Adjustment shall become part of the permit. The applicant further agrees to grant permission to the Todd Township Zoning Administrator and personnel to enter the applicant's premises at reasonable times during the application process and thereafter to make necessary inspections or to subsequently check for compliance with variance conditions or other applicable County or State ordinances.

The undersigned further states that there are no delinquent property taxes, special assessments, penalties, interest, and/or utility fees due on the parcel to which the application relates.

The applicant understands that it is the applicant's sole responsibility to obtain all other federal, state, or local agency permits which may apply to the above described project.

Applicant Signature

Date

Fee \$ _____ Receipt # _____

() APPROVED () DENIED

ASSISTED BY: _____ DATE _____

INSPECTED: _____

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Todd Township Zoning



SKETCH PLAN

***The Site Plan must show, at a minimum, the following features: can attach as a separate sheet or back of page.**

- a. All existing buildings, lot lines and dimensions
- b. Existing and closed wells and septic systems
- c. Driveways, roads and highways
- d. Pertinent information such as distance to a wetland, width of project
- e. If topography is unusual, show elevation levels
- f. Show "Proposed Project" areas / or can use two maps to show existing and proposed
- g. Indicate North point and general slope of land on property

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TODD TOWNSHIP
HUBBARD COUNTY
STATE OF MINNESOTA

AFFIDAVIT OF OWNER / AGENT FORM

STATE OF MINNESOTA)
) ss.
COUNTY OF HUBBARD)

I/We, _____ and _____, property owner(s) of the legally described property below, do hereby authorize _____, to act as my / our Agent and to negotiate and address all proceedings in relation to said application on my behalf. Applicant agrees that all costs, charges, and decisions made by the above Agent on behalf of the Applicant will be paid by the Applicant. Should Applicant not pay said costs and charges, the Township reserves the right to place them on their taxes for recovery pursuant to M.S. 366.012 and/or M.S. 429.101.

Property: Parcel Identification Number: _____

Township ____ Range ____ Section _____, described as follows:

OWNER

OWNER

AGENT

ATTEST:

Subscribed and Sworn to before me this _____ day of _____, 20__.

Notary Public

**TODD TOWNSHIP
HUBBARD COUNTY
STATE OF MINNESOTA**

RIGHT TO ENTER

I / We _____ hereby swear that all of the information included in this application with attached materials is true and correct.

We further give the Township and its designated representatives the right to enter said property at reasonable times during the application process and thereafter to make any necessary inspections or to subsequently check for compliance with permit conditions or other applicable Township Ordinances.

Applicant Signature

Date

Applicant Signature

Date

TODD TOWNSHIP

AGREEMENT TO PAY COSTS RELATED TO PROCESSING OF APPLICATION

WHEREAS, _____ (“Applicant”) _____ (_____ Agent for Applicant), located at _____, MN _____ (PID No. _____ in Section __, Twp 140, Range 35) has applied to Todd Township (“Township”) for a _____; and

WHEREAS, the Town Board desires that the Petitioner pay the costs incurred by the Township in process the Application including, but not limited to, administrative costs, recording costs, Attorney review and Engineer costs, any special meeting costs, and any other professional costs deemed necessary the Town Board for processing the Application, and;

WHEREAS, the Township is willing to process Applicant’s _____ (“Application”) provided that said Applicant pays all costs incurred by the Township in processing said Application; and

NOW, THEREFORE, the Township and Applicant agree as follows:

The Township shall process the Application consistent with Minn. Stat. Chapter 462.

Applicant shall escrow with the Township cash or a letter of credit (collectively, “Surety”) in the amount of **\$750.00** for use in reimbursing the Township’s expenditures in processing the Application and enforcing this Agreement. The Township may draw upon said Surety to reimburse itself for any such expenditure.

The Applicant shall maintain the Surety in the minimum amount of **\$ 750.00** at all times until the Application has been fully processed and shall replenish the Surety as necessary to maintain said minimum amount. In the event that the Surety falls below said minimum, and Applicant fails to replenish the Surety within 10 days after notification by the Township, the Township may take any legal or equitable action it deems necessary against Applicant.

It is understood and agreed that the Applicant will reimburse the Township for all reasonable administrative, legal, planning, engineering and other professional costs incurred in the creation, administration, enforcement or execution of said Application or this Agreement. Applicant agrees to pay all such reasonable costs within 30 days of billing by the Township. Bills not paid within 30 days of billing by the Township shall accrue interest at the rate of 6% per year. Further, if Applicant fails to pay said amounts within the time permitted by this Agreement, then the Township may specially assess such costs against Applicant’s property within the Township. Applicant knowingly and voluntarily waives any and all rights to appeal the assessments under applicable statutes, the Constitution, and case law.

Applicant understands that this Agreement shall in no way obligate the Township to approve the Application.

If any provision contained in this Agreement is held invalid, the validity of the remainder of the Agreement shall not be affected thereby.

This Agreement represents the full and complete understanding of the Parties and both Parties represent that neither Party is relying on any prior Agreements or understandings, whether oral or written. This Agreement shall only be modified, if at all, with the signed written consent of both Parties.

OWNER(S)/AGENT

Name: _____

Date: _____

Name: _____

Date: _____