



**DEPARTMENT OF PLANNING, ZONING, AND SOLID WASTE**

635 Northridge Dr NW, Suite 250 • Pine City, MN • 55063  
(320) 216-4220 • (800) 450-7463 x4220 • FAX (320) 216-4202

**PRELIMINARY PLAT  
APPLICATION CHECKLIST**

- \_\_\_\_\_ Completed Application Form
- \_\_\_\_\_ \$650.00 Application Fee, payable to “Pine County Treasurer”
- \_\_\_\_\_ Legal description of property involved.
- \_\_\_\_\_ Current Abstract of Title or Certificate of Title for the subject property and the property deed.
- \_\_\_\_\_ Beneficiary disclosure statement for property, if held in trust.
- \_\_\_\_\_ **25** initial copies of Preliminary Plat for property involved showing the following items (more copies of the Preliminary Plat may be required for subsequent meetings). All Plats of Survey must conform to the technical standards of MN Statutes 381.12 and 505. For information on these requirements, please have your surveyor contact Robin Mathews, Pine County Surveyor, at 320.216.4205.
  - \_\_\_\_\_ a. Title (including subdivision name), scale (at 1”=100’), north arrow
  - \_\_\_\_\_ b. Location (map and by section, township, and range)
  - \_\_\_\_\_ c. Vicinity map
  - \_\_\_\_\_ d. Date of drawing
  - \_\_\_\_\_ e. Developer/owner (name, address, and contact information)
  - \_\_\_\_\_ f. Designer/Surveyor (name, address, and contact information)
  - \_\_\_\_\_ g. Boundary lines (of the subdivision and referencing USLSC)
  - \_\_\_\_\_ h. Existing structures (on the property and adjacent property)
  - \_\_\_\_\_ i. Utilities (on the property and adjacent property)
  - \_\_\_\_\_ j. Easements (location, width, and purpose for both existing and proposed)
  - \_\_\_\_\_ k. Streets and other rights-of-way (existing and proposed)
  - \_\_\_\_\_ l. Lot lines, dimensions, and numbers
  - \_\_\_\_\_ m. Setback lines for buildings
  - \_\_\_\_\_ n. Dedicated lands for public and non-public uses
  - \_\_\_\_\_ o. Topography at contours between 2 and 10 feet
  - \_\_\_\_\_ p. Soil boring locations (2 per proposed septic location; 2 locations per lot)
  - \_\_\_\_\_ q. Existing and proposed water well locations on each lot
  - \_\_\_\_\_ r. Wetland boundaries, as determined using the 1987 U.S. Army Corps of Engineers Wetland Delineation Manual. Each wetland type is to be indicated on the plat. **NOTE: Proposed stormwater detention/retention ponds are considered wetlands and need to be noted on preliminary plat.**

- \_\_\_\_ s. Surficial geology (rock outcrops, watercourses, marshes, floodplains, and shorelands).  
**Ordinary High Water Level and Base Flood Elevation need to be noted (where applicable). If parcel is in Zone A, a Base Flood Elevation determination is required (including floodway and flood fringe).**
- \_\_\_\_ t. Wooded areas and vegetation (if present)
- \_\_\_\_ u. Existing and proposed deed restrictions or covenants
- \_\_\_\_ v. Zoning classification on property and adjacent property
- \_\_\_\_ w. Adjacent property owners' names

\_\_\_\_\_ **12** copies of Soil Boring data

Site Data – as appropriate (on the plat or separate)

- \_\_\_\_ a. Total acres
- \_\_\_\_ b. Number of lots
- \_\_\_\_ c. Lot sizes
- \_\_\_\_ d. Number of acres designated for lots, open space, stormwater detention, roads, easements, etc.
- \_\_\_\_ e. Phasing Schedule (if proposed)

\_\_\_\_\_ **1** set of preliminary engineering drawings including, but not limited to:

- \_\_\_\_ a. Natural drainage to, from, and on the property
- \_\_\_\_ b. Existing ground surface and proposed street grades
- \_\_\_\_ c. Intent of surface drainage and detention (written statement)
- \_\_\_\_ d. Typical street cross-sections
- \_\_\_\_ e. Typical drainage cross-sections

### **THE PRELIMINARY PLAT REVIEW PROCESS**

Minnesota Statutes § 15.99 exempts the subdivision and platting process from the 60-day rule that governs other zoning requests such as a CUP or variance. Consequently, Pine County will not schedule a public hearing on a preliminary plat request until the technical issues involved with the plat are resolved to the satisfaction of the various County, State, and Federal agencies that have jurisdiction over the request.

Depending on the location of the subject parcel, any or all of the following agencies will review your request: the host township; Pine County Engineer; Pine County Attorney; Pine County Surveyor; Pine County E-911 Coordinator; Pine County Planning, Zoning, and Solid Waste Department; Pine County Soil and Water Conservation District; Minnesota Department of Transportation; Minnesota Department of Natural Resources; Minnesota Board of Water and Soil Resources; U.S. Army Corps of Engineers.

If the subject parcel is located in a township that has adopted a zoning ordinance, you will need to present documentation from the Township that the request meets the requirements of its zoning ordinance before your request will be scheduled for a public hearing before the Pine County Planning Commission.



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 (320) 216-4220 • (800) 450-7463 x 4220 • Fax (320) 591-1640

**PRELIMINARY PLAT APPLICATION**

FILE #:

PETITIONER INFORMATION NAME OF APPLICANT		MAILING ADDRESS	CITY, STATE, ZIP
PHONE #	FAX #	OTHER #(PAGER, CELL, ETC)	E-MAIL ADDRESS
SITE INFORMATION ACRES		SITE ADDRESS OR LOCATION	ASSESSOR'S ID NUMBER
EXISTING LAND USE		CURRENT ZONING	
REQUESTED ACTION			
OTHER APPLICANTS & INTERESTED PARTIES			
NAME		MAILING ADDRESS	SIGNATURE
ALL SIGNATURES ABOVE REPRESENT ALL THE INTERESTS AND HAVE FULL LEGAL CAPACITY TO AND HEREBY DO AUTHORIZE THE FILING OF THIS APPLICATION.			
AGENT/ATTORNEY'S NAME		AGENT/ ATTORNEY'S MAILING ADDRESS	AGENT/ ATTORNEY'S CITY, STATE, ZIP
AGENT/ATTORNEY'S PHONE #		AGENT/ATTORNEY'S FAX #	AGENT/ATTORNEY'S OTHER #(PAGER, CELL, ETC.)
I UNDERSTAND THAT BY SIGNING THIS FORM, THAT THE PROPERTY IN QUESTION MAY BE VISITED BY COUNTY STAFF & BOARD/ COMMISSION MEMBERS THROUGHOUT THE PETITION PROCESS.			
I CERTIFY THAT THE INFORMATION AND EXHIBITS SUBMITTED ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND THAT I AM TO FILE THIS APPLICATION AND ACT ON BEHALF OF THE ABOVE SIGNATURES.			
SIGNATURE OF APPLICANT		DATE	

FEE PAID: \_\_\_\_\_  
 CHECK #: \_\_\_\_\_  
 RECEIPT #: \_\_\_\_\_