



BENTON COUNTY PLANNING & ZONING DEPARTMENT  
 531 DEWEY STREET, PO BOX 129  
 FOLEY, MN 56329-0129  
 PHONE: (320) 968-5065 FAX: (320) 968-5351

**APPLICATION FOR MINOR FINAL PLAT APPROVAL**

1. Name of Subdivision: \_\_\_\_\_
2. Name of Applicant: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Address: \_\_\_\_\_  
(street no. and name) (City) (State) (Zip)
3. Owner of Record: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Address: \_\_\_\_\_  
(street no. and name) (City) (State) (Zip)
4. Land Surveyor: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Address: \_\_\_\_\_  
(street no. and name) (City) (State) (Zip)
5. Subdivision Location: (Section/Twp/Range) \_\_\_\_\_
6. Postal Delivery Area: \_\_\_\_\_ School District: \_\_\_\_\_
7. Total Acreage: \_\_\_\_\_ Zone: \_\_\_\_\_ Number of Lots: \_\_\_\_\_
8. Has the Board of Adjustment granted a variance concerning this property? Yes or No  
 If yes, list Name & File Number \_\_\_\_\_
9. Has the Planning Commission granted conditional use permit for cluster  
 development concerning this property? Yes or No  
 If yes, list Name & File Number \_\_\_\_\_
10. Date of Preliminary Plat Approval: \_\_\_\_\_
11. Type of Park Dedication: \_\_\_\_\_
12. List any changes, if any, since this plat was last before the Commission: \_\_\_\_\_  
 \_\_\_\_\_

I, \_\_\_\_\_ hereby acknowledge that all of the above information and the statements contained in the papers submitted herewith are true.

\_\_\_\_\_  
 (Signature of Landowners)

For Office Use Only	
Parcel No(s): _____	Date Submitted: _____
Fee: \$150.00	Receipt No: _____