



Request for Zoning Compliance Permit

City of Gem Lake, Minnesota

4200 Otter Lake Road, Gem Lake, MN 55110

651 747-2790/92 – fax 651 747-2795

city@gemlakemn.org



_____ (Applicant)

is hereby requesting a Zoning Compliance Permit to allow operation of the following activity**:

at property located at _____
Gem Lake, Minnesota. (Address)

Applicant

Applicant

Date

Contact information:

Mailing address of applicant:

Phone/cell: _____

Email: _____

** Applicant must submit complete description of requested activity and copies of plans for Zoning Administrator approval.

***Additional information may be requested by the Zoning Administrator and/or the City of Gem Lake.

For office use only:

\$200.00 fee paid

\$1,500 deposit paid (escrow)

Zoning Administrator Approval:

Yes: _____
Signature and date

No: _____
Signature and date

Comments:

Date Application Complete: _____
(60 day rule compliance)