

Planning & Zoning Department 2052 County Road 24 Medina, MN 55340 Phone: (763) 473-4643 Fax: (763) 473-9359

Application for Planning Consideration

Type of Request	Data Discount Data 1 (G)
Agricultural Preserve App./Expiration Appeal Administrative Decision Appeal of Wetland Functional Assessment and Value Classification	Date Planning Received: (Stamp Here) MAR - 1 2019
Comprehensive Plan Amendment Concept Plan Review	
Conditional Use Permit Conservation Design Goal Setting Process Environmental Review (eg. EAW, EIS) Interim Use Permit	Request: Site Plan approval for one additional storage Building at Hwy 55 Mini Storage
Lot Combination or Split (Survey Subd.) O Lot Subdivision O Lot Combination O Lot Line Rearrangement X Mixed Use Development O Stage I Plan O Stage II Plan O Stage III Plan	Site Address or Property Identification Number(s): (to be known herein as the "subject property") PID: 041182322001
Planned Unit Development O Concept Plan O PUD General Plan O PUD Final Plan	Address: 4790 rolling Hills Road, Medina, MN 55340
Platted Subdivision O Preliminary Plat O Final Plat XSite Plan Review	Note: All application submittals must have a pre- application meeting with City Planning Staff at least one week prior to submittal.
Site Plan Review (Administrative) Vacation (right-of-way or easement) Variance	Please be sure to read, understand and follow the checklist attachment(s) that accompany any of the "Type of Request" items you are submitting to the City. Office Use Only
Wetland Conservation Act Permit Review Zoning Amendment O Rezoning (Map Amendment) O Text Amendment	Medium Mini-Storage SPR Project Name 3-1-2019 LR-19-245 Date Application Code # \$5000 5315 Amount Paid Check #

REQUIRED SIGNATURES

***Note: All parties with a fee interest in the real estate must sign this application before the City will review for completion! ***

Applicant Information: Name: FP Pedeson (please print)	Fee Title Property Owner Information (if different than applicant) Name: Jeff Redsan
Address: 710 Shawne Woods Rd	(please print) Address: 710 Shawke Woof RD
City, State, Zip: Mcding, MW 55340 Phone: 763-478-6448	City, State, Zip: <u>Medina</u> , <u>MW 5534a</u> Phone: <u>763-478-6448</u>
Cell-Phone: 612-916-6448	Cell- Phone: 612-916-6448
Email: jphwy 55 c gmail. com Signature: My Niew Date: 2-21-19	Email:jehny 55 e. gmail. Com Signature:

Checklist:

Please review the checklist for the type of application you are requesting. Minnesota State Statute provides the City of Medina 15 business days to determine the application's completeness. Completeness depends on whether or not the checklist items are fulfilled.

Review Deadline and Timeline:

All applications must be received by the deadlines noted on the attached sheet. Failure to submit by the date shown will result in a delay in the scheduling of the application or the project. Meeting the deadline does not guarantee that an application will be heard at the next meeting. In fact, to improve likelihood of appearing on an agenda, it is recommended that applications be submitted earlier than deadline.

Most applications have a Statutory review period of 60 days, with the City's ability (which includes city staff) to extend an additional 60 days if necessary due to insufficient information, directive to provide additional information, the tabling or postponement of an application, lack of quorum, or schedules.

Application for Planning Consideration Fee Statement

(Please read carefully and understand your responsibilities associated with this land use application)

The City of Medina has set forth a fee schedule for the year 2019 by City Ordinance (SEE ATTACHED EXHIBIT -A). However, projects of large scope that include two or more requests may be required to provide a higher deposit than the resolution sets forth as determined by the City Administrator. The fees collected for land use projects are collected as deposits only. ALL invoices associated with each land use application will be billed directly to the applicant immediately upon receipt by the City for each project. The City of Medina often utilizes consulting firms to assist in the review of projects. The consultant and City rates are shown at the bottom of this form. By signing this form, the Applicant accepts sole responsibility for any and all fees associated with the land use application from the plan review stage; the construction monitoring stage; and all the way through to the release of any financial guarantees for an approved project. In the event the Applicant fails to make payment of all fees associated with the project, and the Deposit noted herein is not sufficient to cover said costs, the City of Medina will assess any unpaid or delinquent fees related to this application or project against the subject property. If a project is denied by the City Council or withdrawn by the Applicant, the fees associated for the project until such denial or withdrawal, remain the Applicant's responsibility.

I/WE UNDERSTAND THE FEE STATEMENT AND RESPONSIBILITIES ASSOCIATED

WITH	H THIS LAND USE APPLICATION:	THE ASSOCIATED	
	LICANT		
	1	FEE TITLE PROPERTY OWNER	
0	M Gl. A	(if different from Applicant)	
Si 4	Ill. Pfleen	sell Distress	
Signata		Signature	
	JOHN NOWSON	TOPP Palana	
Printed		Printed Name	
	2-21-19		
Date		3-8-19	
		Date	
Applican	ant and/or Property Owner must initial all statements below	w for this application of	
50		who this application to be considered complete.	
-01	1, the Applicant noted above, understand that the \$	5,000 00 deposit will be retained by the City	
_	of Medina in its entirety until the application or proje	deposit will be retained by the City ct is closed. I understand my responsibility in promptly	
TV	paying all bills invoiced to me directly and that the de	ect is closed. I understand my responsibility in promptly eposit WILL NOT be reduced by such regular billings.	
-01	I, the Applicant, understand that the City of Medina of preparation of materials, inspection, and project management	often relies heavily on consultants to	
	preparation of materials, inspection, and project mana projects and that I will be billed at the consultant's 10	agement services related to land use application	
.0	application/project	ngement services related to land-use applications and 0% reimbursable rate for these services provided on my	
31	I the Application of the Applica	and the services provided on my	
	I, the Applicant, understand it is the City of Medina's review and project management related to my applications.	policy to pay all fees associated with Madinary or	
	their time and recovery	policy to pay all fees associated with Medina staff tion/project. I understand that Medina staff documents	
0	their time and resources spent on my application/proje reimbursable rate for these services provided	ect and that I will be billed at the staff's 10004	
Tr	reimbursable rate for these services provided.	3441 5 10076	
<u> </u>	I, the Applicant and/or Fee Title Property Owner, have reviewed and understand the City Fee Schedule and acknowledge my/our responsibility to pay for all fees applicable to processing and review of my application, document preparation, construction and inspection review, general project management application,		
.0	document preparation construction is	applicable to processing and review of my application	
30	I the Fee Title Present O	applicable to processing and review of my application, iew, general project management, and project close out.	
	I, the Fee Title Property Owner noted above (if different understand as the fee owner of the property that the City	nt from or same as the Applicant noted herein)	
~	understand as the fee owner of the property that the Cit related to this application or project against my propert	y of Medina will assess any unpaid or delinquent force	
YES NO	related to this application or project against my propert	y.	
(circle one)	The Hoperty Owner noted above request to	have copies of all invoices mailed to my address	
(mande to my address.	