



City of International Falls Land Use Application

Action Requested:

_____ Variance _____ Preliminary Plan _____ Planned Unit Development
_____ Conditional Use Permit _____ Final Plat _____ Change of Use / Re-zoning

Address of project _____ Assessor's Parcel No. _____

Complete Property Legal Description _____

Zoning District _____ Description of Project _____

Estimated cost of work _____

Property Owner _____ Representative _____

Mailing Address _____ Mailing Address _____

City - State – Zip _____ City - State – Zip _____

Telephone No. _____ Telephone No. _____

Email _____ Email _____

Signature _____ Signature _____

Date _____ Date _____

To be completed by zoning official

Reason for application _____

Zoning Official _____ Date _____