



# VARIANCE APPLICATION

Lake Minnetonka Conservation District  
23505 Smithtown Road, Suite 120  
Shorewood, MN 55331  
Phone: (952)745-0789  
Fax: (952)745-9085

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LMCD Receipt # \_\_\_\_\_

In accordance with LMCD Code Section 1.07, where practical difficulties or particular hardships occur or where necessary to provide access to the handicapped, the Board may permit a variance from the requirements of the Code, or may require a variance from what is otherwise permitted the Code provided that such variance with whatever conditions are deemed necessary by the Board, does not adversely affect the purposes of this ordinances, the public health, safety, and welfare, and reasonable access to or use of the Lake by public or riparian owners. The following application, when completed, shall be filed with the Executive Director of the District along with surveys, photos, and such other information as required.

***Because this form is to be copied, please use black ink or type. The form may be filled out online and printed.***

The person completing this form is the **authorized agent** or **property owner** (select one).

Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Property owner (if different from applicant): \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

## PROPERTY LOCATION:

The property is located in the city of: \_\_\_\_\_

The property is riparian to LMCD bay/area(s): \_\_\_\_\_

**TYPE OF VARIANCE:** \_\_\_\_\_

State practical difficulties and hardships causing variance to be required:

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**ABUTTING LAKESHORE PROPERTY OWNERS:**

North or West: \_\_\_\_\_  
(Name and mailing address)

South or East: \_\_\_\_\_  
(Name and mailing address)

Other affected parties (attach sheet if necessary):  
\_\_\_\_\_  
(Name and mailing address)

Please submit names and mailing addresses of owners within a 350-foot radius of the property. Such owners must be verified by checking with the Hennepin County Auditors Office, (612) 348-5910 (or a private abstract company) which can provide actual mailing labels at a cost of \$1.25 per tax parcel (minimum of \$25.00). This service usually takes two days, and you must have your tax parcel identification number (PIN) ready when calling for this assistance.

Documents listed below are required; check that they are attached:

- Locator Map** (U.S.G.S area map with scale, North direction, Site clearly marked, Name or Title, LMCD Area Name, LMCD number)
- County Plat Map** (Site clearly marked, Name, LMCD area name, LMCD number)
- Certified Land Survey** (Legal description, Name, LMCD area name, LMCD number, 929.4 N.G.V.D. shoreline)
- Proposed facility site plan** (to scale, 929.4' N.G.V.D. shoreline, LMCD area name, LMCD number, Scale, North direction, affected neighbors, locate setback area, locate dock use area, location of dock structure with dimensions and slip numbers, indicate type of slip if applicable)
- Existing facility site plan**, if applicable (to scale, 929.4' N.G.V.D. shoreline, LMCD area name, LMCD number, Scale, North direction, affected neighbors, locate setback area, locate dock use area, location of dock structure with dimensions and slip numbers, indicate type of slip if applicable)
- Scaled drawing of docks on abutting properties** and other affected dockage

***Absence of significant data requested above could result in a processing delay.***

**FEE CALCULATION**

**APPLICATION FEE**..... (non-refundable).....\$250.00

**DEPOSIT**..... (refundable, upon full compliance with the Code and extent of administrative, inspection and legal service required).....+\$250.00

Variance Application

**TOTAL FEE ENCLOSED.....** (this fee is for processing of the application and does not entitle the applicant to a variance)..... **\$500.00**

I certify that the information provided herein and the attachments hereto are true and correct; I understand that any variance granted may be revoked by the District for violation of the LMCD code. I agree to reimburse the District for any legal, surveying, engineering, inspection, maintenance or other expenses incurred by the District in excess of the amount of the application fee. I consent to permitting officers and agents of the District to enter the premises at reasonable times to investigate and to determine whether or not the Code of the District is being complied with.

I agree to submit a certified, as-built survey upon completion of the docks.

\_\_\_\_\_  
**Authorized Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Title**

\_\_\_\_\_  
**Relationship to Owner**

Return this application, attachments and fee to:

**Lake Minnetonka Conservation District  
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