



City of International Falls Land Use Application

Action Requested:

_____ Variance _____ Preliminary Plan _____ Planned Unit Development
_____ Conditional Use Permit _____ Final Plat

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 _____