



**Greater Bemidji Area
Joint Planning Board**

Application for Domestic Farm Animal Permit

Please complete this application carefully and completely. PLEASE PRINT. Failure to fill in all of the required information may result in a delay of processing your application.

A fee of \$ _____ made payable to the **City of Bemidji** must accompany this application. Additional escrow or verification fees may apply for approved projects.

PERMIT: **RECURRENT** **ANNUAL**

OFFICE USE ONLY	
Complete Application Rec'd	_____
Payment Rec'd	_____
Field Checked	_____
Zoning District	_____
Date Permitted	_____
Permit Number	_____
Comments	_____

APPLICANT DATA

NAME OF APPLICANT: _____	EMAIL: _____
MAILING ADDRESS: _____	PARCEL: _____
PHONE NUMBER: WORK _____	HOME _____

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Property Dimensions: Width _____ ft Depth _____ ft Total area _____ sq ft/acres

Is there one acre of contiguous land on the property? Yes No

Have there been any Variances/Use Permits granted on this property? Yes No Don't Know Attach copies

Is property within 1000 feet of a public water? Yes No Is property in an airport zone? Yes No

Does your property contain low areas, wetlands, or areas with standing water? Yes No If Yes, do you intend to drain, fill or otherwise alter this area for any reason?

Explain _____

Septic Data: Year Installed: _____ Last Compliance Inspection: _____
 Pass Compliance Fail Compliance Notarized Stipulation Other _____

Municipal Services: Water Yes No Sewer: Yes No If no, is hook up possible? Yes No

MANAGEMENT PLAN

Type of Animals: _____

Number of Animals Proposed: _____

Primary purpose for keeping farm animals: _____

How will you control Odors? _____

How will you control Noise? _____

What type of Fencing will you use? _____

Height of Fencing: _____

Describe your Shelter: _____

How many square feet of space is available for the animals? _____

Do you have a plan to Recover any animals that escape their enclosure? Yes No

Please describe: _____

Do you plan to Butcher or Process the animals on site? Yes No

If yes, describe your sanitary provisions: _____

Do you plan to conduct any commercial sale of animals from this site? Yes No

ALL APPLICANTS MUST SIGN BELOW

I hereby certify that I am the owner or authorized agent of the owner of the above described property and that all uses will conform to the provisions of the Greater Bemidji Area Zoning and Subdivision Regulations. I further certify that I will comply with all conditions placed upon this permit should this application be approved. Intentional or unintentional falsification of this application or any attachments thereto will serve to make this application and any resultant permit invalid. I also authorize Greater Bemidji Area Joint Planning staff to inspect the property during review of this application and subsequent construction during reasonable times of the day.

Applicant: _____

Applicant _____

Date: _____

OFFICE USE ONLY

Reviewed by _____ Date _____ Complete Application Yes No

COMPLETED FORMS CAN BE SUBMITTED AT CITY HALL, 317 4TH STREET NW, LOWER LEVEL