



Phone: 320-616-5500
Fax: 320-616-5505

WAIVER OF SUBDIVISION

Application Fee: As Per City Fee Schedule

Applicant Name: _____

Date: _____

Site Address: _____

Telephone: _____

Parcel Zoning: _____ Property PID(s): _____

General Information & Qualifications:

- For purposes of lot division and consolidation, a property owner or owners may request a Waiver of Subdivision.
- The length of the process may vary, usually it takes about three weeks.
- Permits will not be issued to a site until the Waiver of Subdivision document is filed at Morrison County by the owner. A filing receipt will be required provided by the owner as evidence of recording before a building permit will be issued.

_____ Is the property platted?

_____ Are all lots within the same subdivision?

_____ Do all resulting lots meet the minimum requirements in City Code? The proposed subdivision shall not create non-conforming lots and not effect existing roads, alleys, drainage, etc.

If the answer is "NO" for any of the above 3 questions, this lot division/consolidation cannot be done through a Waiver of Subdivision. The Property should be platted.

Submittal Requirements:

_____ A letter requesting the City to process a Waiver of Subdivision and Morrison County to record the Waiver of Subdivision and to assign the appropriate Parcel Identification Numbers to all properties. The letter must be signed by all property owners affected.

_____ Completed and Signed Application Form.

_____ A Certificate of survey is required. 5 full size and 5 11" x 17" reductions of the certificate of survey of the lot or lots to be divided or consolidated shall be submitted. The survey must show the dimensions, legal descriptions and lot areas of both the existing lots and the proposed lots.

_____ Payment of the application fee. (Make check payable to the City of Little Falls)

I/We hereby request that the property on the attached certificate of survey be: Divided Combined or Both

We, the undersigned, owners of property, as shown on the attached diagram, pursuant to the applicable statutes of Minnesota, state that to the best of their knowledge, it is in the best interests of the City and the abutting property owners that said property be divided/combined. In consideration of the lot division/consolidation, the undersigned severally waives and releases the City from any and all claims, demands, actions or causes of action of every kind and nature for damages to their real estate arising out of, resulting from, or incidental to the said lot division/consolidation.

Signature of Property Owner(s)

Property Owner Signature

Date

Property Owner Signature

Date

Mailing Address: City of Little Falls, P O Box 244, Little Falls, MN 56345