



DETERMINATION OF SIMILAR USE APPLICATION

Department of Planning and Economic Development
Zoning Section
1400 City Hall Annex, 25 West Fourth Street
Saint Paul, MN 55102-1634
(651) 266-6583

Zoning Office Use Only	
File #	_____
Fee Paid \$	_____
Received By / Date	_____
Tentative Hearing Date	_____

APPLICANT

Name	_____		
	<i>(must have ownership or leasehold interest in the property, contingent included)</i>		
Address	_____	City	_____
		State	_____
		Zip	_____
Email	_____	Phone	_____
Name of Owner (if different)	_____	Email	_____
Contact Person (if different)	_____	Email	_____
Address	_____	City	_____
		State	_____
		Zip	_____

PROPERTY INFO

Address / Location	_____			
PIN(s) & Legal Description	_____			
	<i>(attach additional sheet if necessary)</i>			
	Lot Area	_____	Current Zoning	_____

REQUEST:	Application is hereby made under provisions of Zoning Code § 61.106 for a similar use determination.
Proposed Use	_____

SUPPORTING INFORMATION:	Provide the following information. Attach additional sheets if necessary.
1.	Is the use similar in character to one or more of the uses permitted in the zoning district?
2.	Is the traffic generated by the use similar to traffic generated by one or more permitted uses?
3.	Is the use permitted in a less restrictive zoning district?
<input type="checkbox"/>	Required site plan is attached
<input type="checkbox"/>	If you are a religious institution you may have certain rights under RLUIPA. Please check this box if you identify as a religious institution.

Applicant's Signature _____ Date _____