



MINOR SUBDIVISION APPLICATION

City of New Prague
Planning Department
118 Central Avenue N
New Prague, MN 56071

File Number _____

Fee Paid(\$400) _____

Date Filed _____

Zoning District _____

PID _____

Receipt # _____

Legal Description of Property:

Project Address:

Owner:	Address	City	State	Zip
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Applicant (if different than owner)	Address	City	State	Zip
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Description of Request

Please attach survey showing requested subdivision (or legal descriptions if approved by City Staff)

Signature of Owner	Date
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Signature of Applicant (if different than Owner)	Date
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Approved _____ Denied _____ by the Planning Department _____

Subject to: _____

Signature: _____