

# Goodhue County Zoning Application

## Commercial Timber Harvesting-Alteration Permit

The following information is required before the application may be accepted and considered complete:

### Applicant Information

**Landowner Name** \_\_\_\_\_  
**Parcel #** \_\_\_\_\_  
**Timber Harvester Company Name** \_\_\_\_\_  
**Applicant Name** (if different than owner) \_\_\_\_\_  
**Date of Birth** \_\_\_\_\_  
**Evening Phone** \_\_\_\_\_ **Daytime Phone** \_\_\_\_\_  
**E-mail Address** \_\_\_\_\_

### Required Submittals

- 1) Goodhue County Planning & Zoning form
- 2) Fees paid in full
- 3) Map of proposed area of timber harvesting showing the confines or limits thereof with a plan showing generally the vegetative growth patterns.
- 4) Forest management plan, including the method of harvesting; method of reforestation and soil conservation; slash and refuse disposal
- 5) All necessary state and federal permits

After preliminary review, additional information may be required before the application is considered complete and can be processed

Please mail application, payment and all supporting documents to:

**Goodhue County Land Use Management**  
**Attn: Zoning**  
**509 West Fifth Street**  
**Red Wing MN 55066**

#### Fees:

General Application \$ 50

Receipt Number \_\_\_\_\_

Date Paid \_\_\_\_\_

### Office Use Only

#### Zoning District

- Residential
- Business B-1 B-1
- Industrial
- Agricultural A-1 A-2 A-3
- Shoreland
- Wild & Scenic
- Flood Fringe
- Floodway
- General Flood Plain
- Other: \_\_\_\_\_

#### Shoreland Management Data

Lake/Stream Name: \_\_\_\_\_  
 ID Number: \_\_\_\_\_  
 Classification: NE RE GD Other \_\_\_\_\_

#### Final Action

Brief explanation of decision: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_ Date of Action: \_\_\_\_\_  
 by: Planner/Zoning Administrator

#### Tracking Summary

Date Received : \_\_\_\_\_  
 Application number: \_\_\_\_\_



# Goodhue County Planning & Zoning Commercial Timber Harvesting Permit

Date \_\_\_\_\_ Application Number \_\_\_\_\_

Parcel Number \_\_\_\_\_

Landowner Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Timber Harvester's Name: \_\_\_\_\_

Company Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

Legal Property Description (from deed or abstract attach separate sheet if necessary): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Projected Longevity of Operation: \_\_\_\_\_ start date \_\_\_\_\_ end date

Applicable Article, Section, and Subd of Goodhue County Zoning Ordinance:

**Article 11 (Performance Standards), Section 7 (Timber Harvesting Permits), Subd. 2**

Purpose of timber harvesting, intent of replanting, disposal program and program of land restoration:

\_\_\_\_\_

Highways, roads or public ways in the County upon and along which the timber is to be hauled:

\_\_\_\_\_

**Landowner Signature** \_\_\_\_\_

**Applicant's Signature** (if different than owner) \_\_\_\_\_

**\*\*\*\*\* County Section \*\*\*\*\***

Decision of Zoning Administrator	<input type="checkbox"/> Approve	<input type="checkbox"/> Deny
Special Notes: _____		
_____		
_____		
Planner/Zoning Administrator: _____		
Signature	Date	Printed Name
		Michael Wozniak, AICP