



MANDATORY REFERRAL INTAKE QUESTIONNAIRE

Applicant Information

APPLICANT NAME

APPLICANT PHONE

APPLICANT EMAIL

APPLICANT ADDRESS

APPLICANT CITY

APPLICANT STATE

ZIP CODE

**IS THE APPLICANT A PUBLIC AGENCY
OR PRIVATE ENTITY?**

**IF APPLICANT IS A PUBLIC AGENCY, SELECT
THE APPROPRIATE AGENCY DESIGNATION**

NAME OF AUTHORIZING PUBLIC AGENCY

IF THE APPLICANT IS A PRIVATE ENTITY, WILL THE PROJECT REQUIRE PUBLIC AGENCY AUTHORIZATION?

Project Information

PROJECT NAME

PROPERTY ADDRESS

ZONING DISTRICT

TAX ACCOUNT NUMBER

LOT SIZE

PROPERTY OWNER NAME

PROPERTY OWNER PHONE

PROPERTY OWNER EMAIL

PROPERTY OWNER ADDRESS

PROPERTY OWNER CITY

PROPERTY OWNER STATE

ZIP CODE

PROPERTY OWNERSHIP STATUS



MANDATORY REFERRAL INTAKE QUESTIONNAIRE

Internal Use Only

LEGAL DEPARTMENT DETERMINATION

DATE REQUEST SENT TO LEGAL DEPARTMENT

SIGNATURE

DATE SIGNED

Countywide Planning Division Review

COUNTYWIDE PLANNING DIVISION REVIEW AND APPROVAL OF LEGAL DEPARTMENT DETERMINATION

SIGNATURE

DATE SIGNED

Planning Director Determination of Review

DATE REQUEST RECEIVED IN PDO

DETERMINATION

REVIEW PROCESS

PLANNING DIRECTOR SIGNATURE

DATE SIGNED

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Acknowledgement:

By signing this document, the Applicant acknowledges they have authority to act on behalf of the public agency or private entity.

APPLICANT SIGNATURE

APPLICANT TITLE

DATE SIGNED

**OR EMAIL THIS FORM TO THE M-NCPPC COUNTYWIDE PLANNING DIVISION,
SPECIAL PROJECTS SECTION: MANDATORYREFERRALAPPLICATIONS@PPD.MNCPPC.ORG**