



City of Oronoco
PERMIT FOR CHANGES TO SHORELAND
(In Accordance with the City's Shoreland Ordinance)

Date: _____

Name of Applicant or Agency: _____

Property Address: _____

Mailing Address: _____

Phone _____

Cell #: _____

Email _____

Fax#: _____

Complete Description of Area to be revised: *(Please attach additional Sheet if Necessary)*

Submit with Permit: COPY OF PERMIT ISSUED FROM THE DNR

Authorized Signature

Date

Office Use Only

Date Permit Submitted before Council: _____

_____ Permit Approved

_____ Permit Denied



City Clerk: _____