



APPLICATION FOR:

**AMENDMENT TO AN
AGRICULTURAL COVENANT
(TO RELEASE FARMSITE)**

RETURN TO:

Planning and Zoning Administrator
300 North State Street
Waseca, MN 56093

FOR COUNTY USE ONLY:

Date Application
was received:

Administration Fee: \$100.00 (Check made out to Waseca County)

Recording Fee: \$46.00 (Check made out to Waseca County Recorder)

I. LAND OWNER INFORMATION

Name _____ Phone _____

Name (other owner) _____ Name (other owner) _____

Mailing Address _____ Cell (Alternate) Phone _____

City and State _____ Zip Code _____

Email _____

Applicant's Interest in Property: Fee owner _____

Other Owner(s) _____

II. PROPERTY INFORMATION

1) Tax Parcel Number(s) _____

Quarter- Quarter _____ Section _____ Township _____ Range _____

2) Proposed Description of Tract A being released from the Agricultural Covenant (Attached Exhibit "A"). Please note the size of the tract.

3) Proposed Description of Tract B remaining with the Agricultural Covenant (Attached Exhibit "B"). Please note the size of the tract (Must be 35 Acres)

4) Legal Description of Parcel of Origin (Attached Exhibit "C")

5) Please Attach a drawing of the property illustrating Tract A and Tract B Attached Exhibit ("D").

6) Are there any existing dwelling units or other buildings on the property?

Yes _____ No _____

If yes, how many? _____

7) What is the current zoning of the property?

___ A-1 Agriculture Protection District

___ LR Limited Residential

___ UE Urban Expansion

___ I Industrial

___ HC Highway Commercial

___ VMX Village Mixed Use

9) Describe how the property is currently being used (example: agriculture, Wooded, home site, etc.) _____

III. COVENANT INFORMATION

Please attach a copy of the existing covenant (Attached Exhibit "E")

IV. PROPERTY OWNER CERTIFICATION

I hereby certify that the information furnished on this application and the attachments are true, that I (we) am (are) the legal owner (s) of the property described above, that I (we) have marketable title to the property, and that I (we) have the legal right to amend the covenant on the property. I understand that by modifying the covenant I am altering the benefits afforded to the property under the original covenant.

Signature of Owner (Applicant)

Date

Signature of Co-Owner (Co-Applicant)

Date

Waseca County Board

By: _____
DeAnne Malterer, Chairperson of the Waseca County Board

By: _____
Beth Weimert, Clerk of the Waseca County Board

State of Minnesota)
) ss.
County of Waseca)

This Amendment of Exclusive Agricultural Use Zone Restrictive Covenant was acknowledged before me on _____, by Waseca County Board Chairperson DeAnne Malterer and Beth Weimert, Clerk of the Waseca County Board of Waseca County, Minnesota.

(Seal, if any)

(Signature of notarial officer)

Title (and Rank): _____

My commission expires: _____
(Month/day/year)

Remainder of this page intentionally left black

Owner (s)

By: _____

By: _____

State of Minnesota)
) ss.
County of Waseca)

This instrument was acknowledged before me on _____, by _____, unmarried.

(Seal, if any)

(Signature of notarial officer)

Title (and Rank): _____

My commission expires: _____

(Month/day/year)

State of Minnesota)
) ss.
County of Waseca)

This instrument was acknowledged before me on _____, by _____, unmarried.

(Seal, if any)

(Signature of notarial officer)

Title (and Rank): _____

My commission expires: _____

(Month/day/year)

THIS INSTRUMENT WAS DRAFTED BY:
Waseca County
300 North State Street
Waseca, MN 56093
507-835-0650

Exhibit "A"
Property to be removed from
Exclusive Agricultural Use Zone Restrictive Covenant

Exhibit "B"

Property to remain bound by the benefits and requirements of the
Exclusive Agricultural Use Zone Restrictive Covenant

PID: