

Bed and Breakfast Application

City of Lanesboro
PO Box 333
202 Parkway Avenue S
Lanesboro, MN 55949
www.lanesboro-mn.gov

Part I: General Information.

Applicant Name: _____

Address: _____

Property Owner: _____

Property Owner Address: _____

Part II: Exhibits.

Address of Proposed Bed and Breakfast: _____

Parcel ID: _____

Description of Existing Property Use:

Proposed Use of Property:

Current Zoning of Property: _____

Legal Description of Property:

Number of Rooms to be Rented (more than two (2) rooms requires a conditional use permit): _____

Applicant's Affidavit:

To the best of my (our) knowledge, the above statements and attached information are, in all respects, true and accurate, descriptions of the existing status and proposed plans for the property identified in this application. I, or we, understand that the permit does not constitute a license to operate a Bed & Breakfast establishment, which must be acquired by the State of Minnesota. This permit is not effective if such a license from the State is not received. This permit application fee, if any, is not refundable.

Applicant Signature: _____

Date: _____

____ Approved ____ Denied

City Administrator Signature: _____

Date: _____