



City of Anoka
 2015 First Avenue North ♦ Anoka, MN 55303
 Phone 763-576-2720 ♦ Fax 763-576-2727
ACCESSORY BUILDING
SITE PLAN REVIEW APPLICATION



SITE ADDRESS: _____ OWNER : _____

OWNER ADDRESS (if different than site): _____ PHONE: (____) _____

CONTRACTOR: _____ PHONE:(____) _____

ADDRESS: _____ CITY: _____ ZIP: _____

INTENDED USE OF BUILDING: _____

ACKNOWLEDGEMENT AND SIGNATURE: *The undersigned hereby agrees that in case such permit is granted; that all work which shall be done and all materials which shall comply with the plans and specification therefore herewith submitted and with all the ordinance of said City of Anoka and State Building Codes applicable therein. Furthermore, the applicant agrees not to use the structure as a dwelling unit nor for home occupation purposes.*

SIGNATURE: _____ DATE: _____

Shed Location Sketch (be sure to show the location of property lines, the house, other storage buildings, paved areas, adjacent streets, etc)

- MAXIMUM HEIGHT: 15' (shed/flat roof) or 18' (gable, hip, gambrel, mansard, arch, round)
- SIDE AND REAR SETBACK TO PROPERTY LINE: 5' (Prohibited in front yard)
- IMPERVIOUS COVERAGE: 35% (30% riparian lot)
- Maximum Number of Accessory Buildings: 3

ZONING USE ONLY

Zoning District _____ Impervious Coverage _____ Height _____

Principal Building Setback _____ Side Setback _____ Rear Setback _____

Site Plan Review Fee \$25.00

*Call to schedule final inspection when the work has been completed

Community Development Department Approval By: _____ Date: _____

Final Inspection Completed By: _____ Date: _____