positively Minnesota Department of Employment and Economic Development

MINNESOTA SHOVEL READY certified development site

MN SHOVEL READY CERTIFIED DEVELOPMENT SITE APPLICATION

I. CONTACT INFORMATION

	Submitting Organization*	Local Economic Development Organization (If Different)
Contact Name	**Daniel J. Vogt**	
Organization	**City of Little Falls**	
Address	**100 NE 7th Avenue, P O Box 244**	
City / State / Zip	**Little Falls / MN / 56345-0244**	
County	**Morrison**	
Phone	**(320) 616-5500**	
FAX	**(320) 616-5505**	
E-Mail	dvogt@cityoflittlefalls.com	
*Note Type of Organization (Owner, Broker, Representative, etc.)		Owner

II. SITE/COMMUNITY INFORMATION AND SITE OWNERSHIP

Site Name and Address

Site Name/Designation	Chief Hole-in-the-Day Industrial Park
Primary PIN Number(s)	48.2450.000 - 48.2481.000 and 48.2485.000 - 48.2502.000
Legal Description	Blocks 1, 2, 3, 4, 5, 6, 7 and 8, Chief Hole-in-the-Day Addition
Address	16th, 18th, 20th Streets Northeast and 13th and 15th Avenues Northeast
City	Little Falls
County	Morrison

Site Information

Total developable land	59.1 acres
Number of Parcels	43
Distance to major state/U.S. highway	1.25 miles
Directions from Interstate or Major Highway: Highway 10 to Trunk Highway 27 to Eighteenth Street Northeast	

Attach following schedules for parcel and lot:
- List of parcels/lots and designation within each site.
- Market price for each parcel or lot in $/SF, $/acre and $/lot.
- Any special assessments and the amount due for each lot in $/year and current balance ($) for each lot.
- Real estate taxes payable in the current year by lot or parcel.

Required Documentation

Please enter "yes" in box to the right if the document is attached

Title Commitment using 2006 ALTA Commitment Form	No
ALTA Survey (ASC 2005)	No
If site not owned, attach copy of option or purchase agreement	N/A
Copy of site layout	Yes
Copy of aerial photo(s) identifying site location/major highways	Yes
Schedule and required submittals for site plan approval/permits	Yes
Updated Community Profile as reported in MNPRO's database	Website Unavailable
Will site comply with LEED Certified site requirements? (Refer to instructions for more details)	**No**

Identify All Current Property Owners for This Site

	Owner # 1	Owner #2
Name	City of Little Falls	
Address	100 NE 7th Avenue, P O Box 244	
City / State / Zip	Little Falls / MN / 56345	
Phone	(320) 616-5500	
E-Mail	dvogt@cityoflittlefalls.com	

III. SITE AND SURROUNDING PARCEL LAND USE AND ZONING INFORMATION

Land Use Information

Provide brief description of previous and current land uses of site .	Previsously farm land and vacant property.
Identify current and previous uses of adjacent parcels.	Current and previous uses are farm land and vacant school owned property.

Current and Planned Zoning

Current and planned zoning designation for the site.	Heavy Industrial I-2
Current and planned zoning designation for land within 500 feet of the site.	Planned Unit Development
Identify Municipal jurisdiction for adjacent land (Town/City/County)	Property adjacent to the north is Belle Prairie Township and to the east, west and north is City.

IV. ECONOMIC DEVELOPMENT ZONES

Identify whether **the site** is currently located within any of the following economic development zone designations:

JOBZ - Job Opportunity Building Zone	Yes or **No**
Enterprise Zone	Yes or **No**
Foreign Trade Zone	Yes or **No**
Transit Development Zone	Yes or **No**
Tax Increment Financing (TIF)	**Yes** or No
New Market Tax Credits	Yes or **No**

Identify whether **parcels adjacent to the site** are currently located within any of the following economic development zone designations:

JOBZ - Job Opportunity Building Zone	Yes or **No**
Enterprise Zone	Yes or **No**
Foreign Trade Zone	Yes or **No**
Transit Development Zone	Yes or **No**
Tax Increment Financing (TIF)	**Yes** or No
New Market Tax Credits	Yes or **No**

V. ENVIRONMENTAL SITE ASSESSMENT

		Date Completed
Has a Phase I Environmental Assessment been completed in accordance with ASTM Standard E 1527-05? (Report should include record of historical use of site, as well as an archeological and endangered species assessment) Include a copy of the report with the application.	Yes or **No**	
Was a Phase II Environmental Study required? If so, attach a copy.	Yes or **No**	

VI. TRANSPORTATION

Interstate Highway

Distance to closest **north/south** interstate highway	78 miles
•Identify interstate route number	I35
Distance to closest **east/west** interstate highway	36 miles
•Identify interstate route number	I94

River/Inland/Sea Port/Airport

Does the site have access to a navigable river, inland or sea port?	Yes or **No**
Distance to closest port	N/A
Distance to closest International Airport	110 miles
Distance to local/regional airport	4 miles
Runway length	4011 feet
Navigational Aids	**Yes** or No

Rail Access Contact Information and Service Description

Name of Contact	N/A	
Company		
Address		
City / State / Zip		
Phone		
E-Mail		
Description:		
Nearest Intermodal Facility:	miles	

VII. UTILITY SERVICES

Electric Power Providers and Service Description

Contact Name	Dean Witt
Company	Minnesota Power
Address	1201 Northeast Twelfth Street
City / State / Zip	Little Falls, MN, 56345
Phone	(320) 635-5014
E-Mail	dwitt@mnpower.com

Is three-phase electric service currently at or within the boundary of this site?	**Yes** or No
If yes, what voltages are available?	34 kV
Is existing service overhead or underground?	**Overhead** or Underground
Is a loop (underground loop with two different delivery points) available at site?	Yes or **No**
What is the approximate distance to the nearest substation servicing this site?	3 miles
Is there a potential for dual feed to the site from two different substations?	**Yes** or No
What is the largest demand that can be served at this site using existing system?	No limit

Natural Gas Providers and Service D

Contact Name	Jake Schwietering
Company	CenterPoint Energy
Address	9320 Evergreen Boulevard Northwest, Suite B
City / State / Zip	Coon Rapids, MN, 55433
Phone	(763) 785-5432
E-Mail	jake.schwietering@centerpointenergy.com

Is there natural gas service currently available at the site?	**Yes** or No
If yes, what is the natural gas line size to the site?	4 inches
Line Capacity	case by case basis MCF/hour
Pressure (PSI)	15 PSI

Municipal Water Provider and Service Description

Contact Name	**Greg Kimman**
Municipality	**City of Little Falls**
Address	**P O Box 244**
City / State / Zip	**Little Falls / MN / 56345**
Phone	**(320) 616-5500**
E-Mail	gkimman@cityoflittlefalls.com

Head pressure at closest hydrant	50 PSI
Flow rate at nearest hydrant	2,500 GPM
Attach chemical profile of water	**Yes** or No
Is water from surface or ground water source?	Groundwater
Is water source part of looped system with feed from two sources?	**Yes** or No
Any planned upgrades, if so, when?	No
What will be the incremental capacity?	GPM
Will redundancy or loop be added?	Yes or **No**

Contact Name	**Greg Kimman**
Municipality	**City of Little Falls**

Municipal Sanitary Sewer Provider and Service Description

Contact Name	**Greg Kimman**	Sewer line in place near/at site?	**Yes** or No
Municipality	**City of Little Falls**	Diameter of line at site	6 inches
Address	**P O Box 244**	Size of sewer main in public right-of-way?	10 inches
City / State / Zip	**Little Falls / MN / 56345**	Depth of sewer in public right-of-way?	12+ feet
Phone	**(320) 616-5500**	Any special pretreatment	Yes or **No**
E-Mail	gkimman@cityoflittlefalls.com	Any incremental treatment capacity planned? If yes, note additional capacity.	Yes or **No** GPD

Municipal Storm Sewer Service Description/Requirements **Based on City Engineer input:**

Contact Name	Greg Kimman	Capacity of sewer during 5-year storm event	3.50 CFS
Municipality	City of Little Falls	Capacity of sewer during 10-year storm event	3.50 CFS
Address	P O Box 244	Capacity of sewer during 20-year storm event	3.50 CFS
City / State / Zip	Little Falls / MN / 56345		
Phone	(320) 616-5500		
E-Mail	gkimman@cityoflittlefalls.com		

Any additional storm water treatment or rate of discharge control required for this site?	**Yes** or No
If yes, describe treatment/control required: post construction rate ≤ preconstruction rate.	

MPCA MS4 (Small Municipal Separate Storm Sewer Systems) program compliance:

Are you required to obtain permit coverage for storm water discharges? If yes, attach copy of MPCA letter on permit application.	**Yes** or No
Have you satisfied the MS4 permit conditions to develop/implement storm mgmt. program and report on status/effectiveness?	**Yes** or No
Are you required to obtain a NPDES (Nat'l Pollutant Discharge Elimination System) permit for storm water during construction?	**Yes** or No
If yes, have you prepared a Storm Water Pollution Prevention Plan (SWPPP) for erosion prevention/sediment control? (Attach copy of plan)	Yes or **No**

Telecommunications Providers and Service Description

Contact Name	Tony VanderHagen
Company	Century Link
Address	4658 Heatherwood Road
City / State / Zip	Saint Cloud, MN, 56301
Phone	(320) 255-8533
E-Mail	tony.vanderhagen@centurylink.com

Is there telecommunications service currently available at the site?	**Yes** or No
Does the site have broadband service?	**Yes** or No
If there is broadband service, what is the upstream band width?	0.9 Mbps
What is the downstream band width?	7 Mbps
What is the type of delivery medium (copper, fiber optics, etc.)	Copper
If service not available, how soon could it be installed?	**N/A** Weeks

VIII. VERIFICATION AND ASSURANCE

I agree that the information is valid and accurate on a best effort basis, that the site can be listed on the MNPRO web site, and that the site information and community profile will be updated every 120 days. Signature: Daniel J Vogt

Name: Daniel J. Vogt	Title: City Administrator	Organization: City of Little Falls	Date: 08/19/15