City of Fort Atkinson
City Manager's Office
101 N. Main Street
Fort Atkinson, WI 53538

City of Fort Atkinson Certified Survey Map Application

This form is designed to be used by the Applicant as a guide to submitting a complete application for review of a Certified Survey Map by the City to process the application.

APPLICANT Name, company, and client (if applicable):_____

_____

Phone number:_____Email:_____

OWNER Name, company, and client (if applicable):_____

_____

Phone number:_____Email:_____

Postal address for proposed CSM:_____

_____

_____

Parcel Identification Numbers Involved:_____

_____

_____

Brief description of proposed division or combination and purpose: _____

_____

_____

_____

I Application Packet Requirements

The Applicant shall submit one electronic copy of the application.

- ❑ A map of the subject property to scale depicting:
  - ❑ All lands and boundaries for the parcel(s)
  - ❑ Current zoning of the subject property and its environs, and the jurisdiction(s) whichmaintains that control.
  - ❑ All lot dimensions of the subject property.
  - ❑ A graphic scale and a north arrow.
- ❑ Legal Description
- ❑ All easements, setbacks or land restrictions on the parcel(s)

City of Fort Atkinson
City Manager's Office
101 N. Main Street
Fort Atkinson, WI 53538

II Process Checklist

- ❑ Application fee of $100 plus $10 per additional lot received by City Treasurer (Maximum $150) Date: _____
- ❑ Receipt of complete application packet by Zoning Administrator Date: _____
- ❑ City Staff Review Date: _____
- ❑ Plan Commission Public Hearing, review and recommendation Date: _____
- ❑ City Council review and action

Dated this____day of_____, 20 ____

Respectfully submitted,

_____

(Signature of Applicant)