

CERTIFIED SURVEY MAP
REVIEW APPLICATION

TOWN of LYNDON
W6081 County Road N
Plymouth, WI 53073
920-528-7255

Name of Owner(s) _____

Address of Owner(s) _____

Phone # _____

Owners Email Address _____

Site Address/Location _____

Site Zoning Current _____ Proposed _____

Tax Parcel ID # _____

Name of Surveyor _____

Address of Surveyor _____

Surveyors Phone # _____

Location of Proposed CSM Section _____ Township _____ N Range _____ E

The review process shall begin when the Town Clerk receives, in one submittal, all of the following:

1. A completed application no less than 10 days before the next Plan Commission Meeting. The Plan Commission meets on the first Wednesday of the month.
2. 12 (twelve) full size copies of the proposed Certified Survey Map.
3. On the CSM, the Surveyor's Certificate shall include text certifying compliance with the Town of Lyndon Zoning Ordinances.
4. The following appropriate application fee:

