

CERTIFIED SURVEY MAP
REVIEW APPLICATION

W6081 County Road N
TOWN of LYNDON
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 6 days before the next Plan Commission Meeting.
The Plan Commission meets on the first Wednesday of the month.
2. 10 (ten) 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:

CERTIFIED SURVEY MAP
REVIEW APPLICATION

Please check appropriate line(s)

_____ For a 1(one) Lot Certified Survey Map \$125.00 + \$50.00 deposit

_____ For a 2(two) Lot Certified Survey Map \$150.00 + \$50.00 deposit

_____ For a 3(three) Lot Certified Survey Map \$175.00 + \$50.00 deposit

_____ For a 4(four) Lot Certified Survey Map \$200.00 + \$50.00 deposit

_____ CSM includes Right-of-Way Dedication to Town \$100.00 + 50 deposit

5. The \$50.00 deposit to be returned to applicant upon Town receiving a full size paper copy of the recorded Certified Survey Map within 30 days of the signed approval of the Lyndon Town Chairman.

Signature of Applicant

Date

For Office Use Only

Time and Date Submitted _____

Recipient _____

Name Title _____

Total Fees Submitted \$ _____

Date of Plan Commission review _____

Date of Town Board approval _____