

APPLICATION FOR  
**CERTIFIED SURVEY MAP**  
 CITY OF PLATTEVILLE, WISCONSIN



**General Information** (please type or print clearly)

	Applicant/Agent	Owner
<b>Name</b>		
<b>Address</b>		
<b>Phone</b>		
<b>Email</b>		

**Property Information** (Attach additional sheets if necessary)

This application is for approval of a:  Certified Survey Map

This property is located in the:  City of Platteville  Town of Platteville  Town of \_\_\_\_\_

Present Legal Description:

\_\_\_\_\_

Change Requested, or New Description:

\_\_\_\_\_

Zoning of Property: \_\_\_\_\_

Comprehensive Plan Designation: \_\_\_\_\_

Current Use of Property: \_\_\_\_\_

Proposed Use of Property: \_\_\_\_\_

**Signatures**

The undersigned understands and agrees with the following conditions: No building permits will be issued until the certified survey map or plat has been recorded with the Register of Deeds of Grant County, Wisconsin, and the approval conditions (if any) have been complied with.

APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_

APPLICANT: \_\_\_\_\_ DATE: \_\_\_\_\_

**OFFICE USE ONLY**

Date Application Filed: \_\_\_\_\_ File Number: \_\_\_\_\_

Plan Commission Action & Date: \_\_\_\_\_ Fee Paid/Receipt #: \_\_\_\_\_

Conditions of Approval: \_\_\_\_\_

\_\_\_\_\_