



APPLICATION: CERTIFIED SURVEY MAP REVIEW FORM

This application is required if you are seeking to divide, combine, or reconfigure up to four parcels. All parcels must meet the dimensional requirements as set forth in their zoning district. Information on zoning districts can be found in [Section 17 of the Municipal Code](#). Information on certified survey maps can be found in [Section 18.29 of the Municipal Code](#). Please note that the City of Kaukauna has extraterritorial review authority for any certified survey maps created for parcels located in townships within three miles of city borders.

Petitioner Information:

Name:

Mailing Address:

Phone Number:

Email:

***Property Owner Information (If Not Petitioner):**

Name:

Mailing Address:

Phone Number:

Email:

Property Information:

Site Address/Location:

Lot Dimensions and Area:

Current Zoning:

Number of Lots to be Created:

***If multiple owners are involved, please add all additional owner information on an attached document.**

Please State Reason(s) for Certified Survey Map Review Request:

Additional Requirements: For Certified Survey Map review, professionally drawn maps are required to be submitted. These maps must include all structures, lot lines, and streets with distances to each. Maps should be drawn to a scale of not less than 1":1,000'. Additional information may also be requested as may be appropriate per the proposal being made.

Lot Division by CSM (1-4 lots) Fee Schedule: \$10.00/lot based on total lots

Please Note: The City of Kaukauna will **never** request payment for an application in the form of a wire transfer. All payments are to be made by check to the City of Kaukauna (address below) and are due when the application is submitted, prior to review.

Application Timeline: Certified survey map reviews often require action by multiple governmental bodies and sometimes reviews and authorizations can take more than 30 days. Please let staff know of your request as early as possible if you have a specific deadline that you need Plan Commission authorization by.

Signature of Petitioner:

Signature of Owner (If Not Petitioner):

Date Submitted to the City of Kaukauna:

Please submit by email to planning@kaukauna.gov or by mail to:

City of Kaukauna
Attn: Planning and Community Development Department
144 W Second Street
Kaukauna, WI 54130

FOR DEPARTMENT USE ONLY:

Date Application Received:

Payment Received:

Payment Receipt #:

Certified Survey Map Reviewed:

Plan Commission Approval:

Legislative Committee Approval:

Common Council Approval:

Signature of Planning & Community Dev. Staff:

