

**TOWN OF SIOUX CREEK LAND DIVISION**  
**APPLICATION FORM AND APPROVAL RECORD**

SHADED AREAS FOR STAFF USE ONLY

PROJECT NUMBER	SUBDIVISION OR PROJECT NAME
----------------	-----------------------------

APPLICATION TYPE: <input type="checkbox"/> CERTIFIED SURVEY MAP (check all that apply) <input type="checkbox"/> SKETCH PLAN <input type="checkbox"/> PRELIMINARY PLAT <input type="checkbox"/> FINAL PLAT <input type="checkbox"/> WAIVER OF DESIGN STANDARD <input type="checkbox"/> LAND DIVISION W/ ALL LOTS >20 ACRES	ATTACHMENTS: <input type="checkbox"/> CERTIFIED SURVEY MAP CHECKLIST (check all that apply) <input type="checkbox"/> SKETCH PLAN CHECKLIST <input type="checkbox"/> PRELIMINARY PLAT CHECKLIST <input type="checkbox"/> FINAL PLAT CHECKLIST <input type="checkbox"/> REQUIRED STUDIES BY ORDINANCE <input type="checkbox"/> APPLICABLE FEES
--	---

**PROPERTY INFORMATION**

STREET ADDRESS(ES)	COUNTY PARCEL IDENTIFICATION NUMBER(S) <i>(required)</i>
--------------------	--

SUBDIVISION OR PROJECT NAME *(if applicable)*

LEGAL DESCRIPTION *(attach additional paper or maps as needed)*

LOT(S)	BLOCK(S)	SECTION(S)	TOWNSHIP T 32 N	RANGE R 11 W
--------	----------	------------	--------------------	-----------------

TOTAL ACREAGE: \_\_\_\_\_ # OF TOTAL PROPOSED LOTS *(including parent parcel)*: \_\_\_\_\_

IDENTIFY PROPOSED USES (single-family residential, condominium, type of commercial, etc):

**APPLICANTS**

APPLICANT/PROPERTY OWNER	STREET ADDRESS
--------------------------	----------------

CITY	STATE	ZIP CODE	PHONE	FAX
------	-------	----------	-------	-----

AGENT/CONSULTANT/SURVEYOR	STREET ADDRESS
---------------------------	----------------

CITY	STATE	ZIP CODE	PHONE	FAX
------	-------	----------	-------	-----

*All parties with an ownership interest in the properties involved in the land division must be identified by the applicant; contact information and the type of interest must be provided. Attach additional information or materials as needed.*

**RELATE ANY PERTINENT APPLICATION CIRCUMSTANCES**

(ATTACH ANY REQUIRED CHECKLIST OR ADDITIONAL MATERIALS)

**Please Note:  
Subdividing your land may limit your options for future land divisions.**

**CERTIFICATION**

I certify that the information and exhibits I have submitted are true and correct to the best of my knowledge. In filing the application, I am acting with the knowledge and consent of those persons who are owners of subject property or are parties to this application. I understand that all materials required by the Town of Sioux Creek must be submitted prior to having this matter processed. I understand that public hearings or meetings may be required. I understand that additional fees or materials may be required as the result of considerations which may arise in the processing of this application. I understand that road and park dedications may be required as a condition of approval. I understand that I am consenting to allow the Town of Sioux Creek Plan Commission or their designees to enter onto and inspect the subject property at any reasonable time, without obtaining any prior consent.

SIGNATURE <b>X</b>	DATE
-----------------------	------

SIGNATURE <b>X</b>	DATE
-----------------------	------

**TOWN OF SIOUX CREEK LAND DIVISION ORDINANCE**

PLEASE REFER TO THE *TOWN OF SIOUX CREEK LAND DIVISION ORDINANCE* FOR COMPLETE REQUIREMENTS  
 ADDITIONAL EXPLANATORY MATERIALS CAN BE FOUND IN THE *TOWN OF SIOUX CREEK LAND DIVISION PROCEDURAL HANDBOOK*.

**PLEASE SEE THE BACK**

**FEES**

Fees are established by the Town Board and subject to change annually.  
The fee schedule is provided in *the Town of Sioux Creek Land Division Procedural Handbook*.

Additional potential costs to the developer as discussed in the *Town of Sioux Creek Land Division Ordinance*:

- any required mailings to nearby landowners
- any additional costs incurred by Town in review of the application, including studies, engineering analysis, legal, etc.

**SURVEYOR CERTIFICATION**

All CSMs and Final Plats must be preformed and prepared by a Wisconsin Registered Land Surveyor. Preliminary Plats must be based upon a survey of a registered land surveyor.

Check the following to verify that each has been completed:

- € THE SURVEYOR'S STAMP AND SIGNATURE IS INCLUDED ON THE FACE OF THE CERTIFIED SURVEY MAP
- € THE SURVEYOR'S CERTIFICATE IS INCLUDED WITH THE CSM OR FINAL PLAT.
- € THE SURVEYOR MUST INCLUDE A STATEMENT OF CORRECT REPRESENTATION AND A STATEMENT OF FULL COMPLIANCE WITH THE PROVISIONS OF WIS. STATS 236.

**GOVERNMENTAL TRACKING & APPROVALS**

SHADED AREAS FOR STAFF USE ONLY

Application Received by Town Clerk: \_\_\_\_\_

Initial Consultation with Plan Commission (if required): \_\_\_\_\_

Site Inspection (if required): \_\_\_\_\_

Certified mailing sent to landowners within 200 feet: \_\_\_\_\_

Public Hearing: \_\_\_\_\_

Plan Commission Action on Preliminary Plat or CSM: \_\_\_\_\_

Plan Commission Action on Final Plat or CSM: \_\_\_\_\_

Town Board Action on Final Plat or CSM: \_\_\_\_\_

← ← *may be same date*

**LAND DIVISIONS INVOLVING ONLY TWO PARCELS (Town Clerk Administrative Review)**

Application Received by Town Clerk: \_\_\_\_\_

Application Reviewed and Approved by Town Clerk: \_\_\_\_\_

If referred to Plan Commission, note reason(s): \_\_\_\_\_

**If Conditional Approval, note conditions here (*attach minutes*):**

SHADED AREAS FOR STAFF USE ONLY

Date Conditions Met: \_\_\_\_\_

**If Denied, note reasons for denial here (*attach minutes*):**

SHADED AREAS FOR STAFF USE ONLY

**STAFF NOTES & OTHER KEY DATES**

SHADED AREAS FOR STAFF USE ONLY

**PLEASE NOTE**

The *Town of Sioux Creek Comprehensive Plan* vision statement, goals, objectives, and strategies can provide important insight and guidance to assist in the planning of your land division.

Other State, County, and/or local rules and regulations may also apply to your land division and the development of your property. Some of these are discussed in the *Town of Sioux Creek Land Division Procedural Handbook*.