



Certified Survey Map/Condo Plat Application  
**CHECKLIST**

**Process**

At the time of application you will be asked to:

1.  **Complete an application** form, completed checklist and submit a \$150 fee;
2.  **Provide detailed plans** and all information required for your Certified Survey Map, including future development plans on your part and the development trend in the general area and the existing use of the surrounding area;
3.  **Provide a written statement** of verifiable facts and information pertaining to your request (this would include a letter from the owner of the property if they cannot be present at the meeting);
4.  **Certified Survey Map (CSM)** - all of the lot corners shall be monumented in accordance with Wis. Stats. § 236.15(1)(c) and (d);
5.  **CSM Approver** - The map shall be prepared in accordance with Wis. Stats. § 236.20(2)(a) –(c), (e)–(h), (j), (k) and (l) on durable white paper 8½ inches wide by 14 inches long. All lines shall be made with nonfading black ink on a scale of not more than 250 feet to an inch.;
6.  **Condominium Plat** – local review instruments must be in accordance with Wis. Stats. § 703.115;
7.  **Copies provided- 15 Copies** of all submitted items must accompany application Please do NOT include copies of the application – only 1 (one) ORIGINAL application is required.

Following these steps, the Inspection Department will prepare and submit the request to the Planning Commission to decide the final action taken; If the Plan Commission does not act within sixty (60) days, the application shall be deemed denied. The burden will be on you as property owner and/or agent to provide information upon which the commission may base its decision. At the public meeting, any party may appear in person or may be represented by an agent or attorney. You or your agent must present all information needed to the Planning Commission to make a decision in your favor. Unless you or your agent is present, the commission may not have sufficient information to vote and must then deny or table your application.

**Certified Survey Maps:** All dimensions shown relating to the location and size of the lot shall be based upon an actual and true survey by a "registered land surveyor" or a "registered professional engineer," registered with the State of Wisconsin; The map shall include the affidavit of the surveyor who surveyed and mapped the parcel, typed, lettered or reproduced legibly with nonfading black ink, giving a clear and concise description of the land surveyed by bearings and distances, commencing with some corner marked and established in the U.S. Public Land Survey or some corner providing reference to a corner marked and established in the U.S. Public Land Survey. Such affidavit shall include the statement of the surveyor to the effect that he has fully complied with the requirements of this Section; the certificate of approval of the Plan Commission shall be typed, lettered or reproduced legibly with nonfading black ink on the face of the map. (*City Ordinance 5.06.09 and 5.06.095 for more details*)

**\*\*The map shall be filed by the divider for record with the Register of Deeds once it has been approved by City Council\*\***

*EXAMPLE of CSM wording:*

*This Certified Survey/Land Plat located in the City of Rhineland which reflects property owned by \_\_\_\_\_ is approved by the Rhineland Plan Commission on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.*

*I hereby certify that the foregoing is in conformity with the action of the City of Rhineland Plan Commission.*

Dated \_\_\_\_\_ Approved \_\_\_\_\_

MAYOR

Paperwork Due: (Inspection Dept) \_\_\_\_\_

Planning Commission Date: \_\_\_\_\_

**Meeting location:** Rhineland City Hall, 135 S. Stevens Street, Rhineland, WI. 54501

# CITY OF RHINELANDER

Planning Commission



## General information

To be completed in its entirety by the applicant. **\*\*PRINT CLEARLY AND LEGIBLY!\*\***

**Pre-application meeting with staff:** Prior to submittal of this application, the applicant is strongly encouraged to discuss the proposed project and submittal material with the Inspection Department staff (715-365-8606).

**Incomplete applications could result in delay or denial by the Planning Commission.**

Date of pre-application meeting: \_\_\_\_\_ Date filed \_\_\_\_\_

\$150 fee paid (payable to *City of Rhinelanders*)

Form of Payment:  Check # \_\_\_\_\_  Cash  PSN \_\_\_\_\_

	Owner	Applicant/Agent
Name		
Address		
Phone		
Email		

Address Location of the request: \_\_\_\_\_

Current Property Zoned: \_\_\_\_\_ Tax parcel number: RH \_\_\_\_\_

**What is your interest** in the subject property:

Owner  Prospective Owner  Renter  Representative

**What is the current use** of the property:  Vacant  Residence (# of units: \_\_\_\_\_)  Business ( Comm/ Indust)

**What is the reason** or purpose of the request: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Describe in detail** the nature of the CSM request (use separate paper with details). Include information regarding construction of new buildings, remodeling of existing buildings, proposed use, etc.

It is understood that the applicant or representative is required to be present at the scheduled meeting.

I certify that the information I have provided in this application is true and accurate; I acknowledge any statements implied and drawings submitted as fact require supporting evidence.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

Owner  Agent  Applicant

Print Name: \_\_\_\_\_

## DECISION

The Planning Commission:  Approved  Denied

The Commission, in accordance with the findings of fact, hereby determines that the request for: \_\_\_\_\_ (is) (is not) in compliance with all the standards for a Certified Survey and/or site plan requirements.

Further finding of fact is stated on minutes of this Planning Commission meeting.

Meeting Date: \_\_\_\_\_ Other Information: \_\_\_\_\_