

PERMIT	#	
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TOWN OF LAND O' LAKES SUBDIVISION PERMIT APPLICATION

Subdivision/Planned Residential Development/Planned Unit Development

I OCATION OF PRODERTY.		DADCEL #		
LOCATION OF PROPERTY:				
OWNER:		APPLICANT:		
ADDRESS:		ADDRESS:		
PHONE:		PHONE:		
EMAIL:		EMAIL:		
SIGNATURE OF PROPERTY OWNER:		DATE:		
SIGNATURE OF APPLICANT:		DATE:		
SURVEYOR:		PROPOSED USE:		
ADDRESS:		Residential	Commercial	Industrial
PHONE:		# OF LOTS:		
A Certified Survey Map(s) preprequirements of Section 236.24 Administrative Code. In addition, the Map shall show correctly each subdivided lot or parcel. T	4, Wisconsin Statues and in all on to the information required on its face, the following: sca	respects with Chapte I in Section 235.34, W le drawing of the pro	er A-E 7 of the Wis isconsin Statues of perty showing the	sconsin or Chapter A-E dimensions of
FEES PAID: Checks pay	yable to the Town of Land O	' Lakes		
ZONING FEE	Payment:	Dat	e Received:	
ZONING PERMIT EXPIRES				
APPROVED/DENIED:				
ZONING PERMIT GRANTED _	YESNO			
ZONING ADMINISTRATOR SIG	GNATURE			
WATER/SEWER ALLOCATION	NYESNON/A			
Applicant must obta	ain a Certificate of Subdivis	ion Compliance befo	ore the permit ex	pires.