

APPLICATION FOR LAND DIVISION

OCONTO COUNTY PLANNING & ZONING

Parcel No _____ - _____ - _____

Location (Gov. Lot _____ or _____ 1/4, _____ 1/4), Section _____, T _____ N, R _____ E, Town of _____

(CSM - Vol. & Page _____, Lot _____) or (Plat Name _____, Block _____, Lot _____)

Owner(s) Name: _____

Address _____ City _____ State & Zip _____

Surveyor's Name: _____ Phone _____

Address _____ City _____ State & Zip _____

Completed by Surveyor

I certify that this is a true representation of the property and that once submitted for review, no changes will be made other than those requested or disclosed with objecting and approving authorities. I understand that any substantial changes not requested may require re-submittal with applicable review fees.

Surveyor's Signature

Date

Submittal Date

Review Fee

Approval Date

CSM (\$175 (up to 1 lot) + \$15 for each add'l lot)

Retracement CSM (\$150)

Preliminary (\$200)
Review

Final (\$360 (up to 4 lots/units) +
Review \$15 for each add'l lot/unit)

Final Approval

County Plat Date _____ Fee _____

Date _____ Fee _____

Date _____

State Plat Date _____ Fee _____

Date _____ Fee _____

Date _____

Condominium Date _____ Fee _____

Date _____ Fee _____

Date _____

Completed by P&Z Staff

Copies submitted to the following for review and comment:

Date Sent

Date Sent

- _____ Oconto County Surveyor
- _____ Oconto County Property Lister
- _____ Oconto County Treasurer
- _____ Oconto County Land Conservation
- _____ Oconto County Forestry and Parks Department
- _____ Oconto County Highway Department
- _____ Physical Address Coordinator
- _____ Register of Deeds (Plat Only)

- _____ WDNR
- _____ WDOT
- _____ School District
- _____ Utilities – Electric/Gas
- _____ Utilities – Phone Company
- _____ Town
- _____ City/Village of _____
- _____ Extraterritorial Review
- _____ Other

We the above objecting / approving authority, (have / have no) comments regarding this land division proposal.

Contact Person: _____ Phone: _____

Comments: _____
