



CITY OF LA CROSSE, WISCONSIN
CERTIFIED SURVEY MAP SUBMITTAL & REVIEW CHECK LIST

Rev. 1/2020

- X CSM located in Extra-Territorial Jurisdiction (Council Approval Required)
X CSM located in the City (Department Review Only)

Extra-Territorial Review: BEFORE FILING WITH THE CITY, you must have both Town and County approvals. The Plan Commission may not consider any land division which did not have prior approval by the approving authorities for both the Town(s) and La Crosse County.

Town Board Approved: 12/8/2020 (date) La Crosse County Approved: N/A

To be completed by property owner/surveyor with submittal (\*incomplete checklist may cause a delay in the review):

Current Tax Parcel Number(s): Tax ID # 17-10491-10 and #9-1041-1
Map ID / Location: Gov. Lot 5 Section 21, T16N, R7W, Town of Medary & City of La Crosse WI. La Crosse County
Surveyor: Jonathan A. Schmitz S-2465 Phone No. 608-487-1029
Property Owner: Christopher J Meyer Christopher J Meyer Phone No. 608-769-0460
\*\*circle who should be called when CSM is ready for pick up.

I am the property owner of record, and I approve of this CSM: Christopher J. Meyer
October 8, 2020 (property owner signature)
\*In lieu of owner's signature on this submittal checklist, you may provide written communication from property owner.

Purpose of CSM and intended outcome (or attach a letter explaining): To separate the shop property onto one lot & have the Bluff Land on its own lot. Define the Ingress/Egress easment to the lot to the North of #9-1041-1 which is lot #9-1025-0. Also grant an Ingress/Egress easment on Lot #17-10491-10 that did not previously exist. The Ingress/Egress easment is shown on the new CSM.

Have you worked with any other Department/staff person with regard to this CSM? If so, who?
Cory & Bryan with the La Crosse County. October 8, 2020 8:45 AM
Going to the Town of Medary town hall on 10/08/2020 at 4:00 PM

Have you received any other decision with regard to this CSM from any City board, commission or committee?
If so, which one and when? Not at this time. 10/08/2020

To be completed by City Clerk at time of filing:

- 12/13/21 Original Document for Signature. (Clerk will make a photocopy which is distributed for review.)
12/13/21 Review Fee (cash, check payable to City Treasurer or credit card with convenience fee)
\$200.00 - First Application
\$100.00 - Reapplication of the same CSM
12/14/21 Internal Review Routing & Email to County Surveyor. (Initiated by Clerk with complete filing.)
Original CSM Issued. (Upon approval, the original will be signed and available for pick up.)

**To be completed by each Reviewing Department before the City Clerk will sign.**

**FIRE PREVENTION AND BUILDING SAFETY APPROVAL**

This Certified Survey Map is hereby approved by the Chief Inspector.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Chief Inspector

Comments: \_\_\_\_\_  
\_\_\_\_\_

**CITY UTILITIES (WATER – STORM – SEWER)**

This Certified Survey Map is hereby approved by the City Utilities Office.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

Water  Storm  Sewer

\_\_\_\_\_  
Utilities Office

Comments: \_\_\_\_\_  
\_\_\_\_\_

**ASSESSOR APPROVAL**

This Certified Survey Map is hereby approved by the Assessor.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Lead Appraisal Specialist

Comments: \_\_\_\_\_  
\_\_\_\_\_

**ENGINEERING DEPARTMENT APPROVAL**

This Certified Survey Map is hereby approved by the City Surveyor.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
City Surveyor

Comments: \_\_\_\_\_  
\_\_\_\_\_

**COMMON COUNCIL APPROVAL**

Resolved that this Certified Survey Map is hereby approved by the Common Council of the City of La Crosse.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Mayor *(required only if signing off prior to expiration of veto period)*

I hereby certify that the foregoing is a copy of a resolution adopted by the Common Council of the City of La Crosse.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
City Clerk