

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 21 day of Sept, 2020

Conditionally approved

Chief Inspector

Comments: pending Council approving zoning change 10/8/2020

CITY UTILITIES (WATER – STORM – SEWER)

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

Dated this 23 day of Sept, 2020

Water Storm Sewer

approved per memo

Utilities Office

Comments: _____

ASSESSOR APPROVAL

This Certified Survey Map is hereby approved by the Assessor.

Dated this 16 day of Sept, 2020

approve per email

Lead Appraisal Specialist

Comments: _____

ENGINEERING DEPARTMENT APPROVAL

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

Dated this 12 day of October, 2020

approved per email

City Surveyor

Comments: w/ revision

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