Craig, Sondra

From: Lenz, Bernard

Sent: Monday, May 10, 2021 4:12 PM

To: Craig, Sondra

Cc: Dunnum, Scott; Erickson, Tina; Neumann, Shannon; Reinhart, David

Subject: FW: FOR REVIEW - CSM Jackson St & 4th St (City Brewery)

Attachments: CSM Submitted 4.14.2021.pdf; CSM Submittal Checklist signed.pdf

Sondra,

The Utility has no concern with this CSM. See signed checklist sheet attached.

Bernie

From: Craig, Sondra

Sent: Thursday, April 15, 2021 4:37 PM

To: Dunnum, Scott < Dunnums@cityoflacrosse.org >; Erickson, Tina < ericksont@cityoflacrosse.org >; Neumann, Shannon

< Neumanns@cityoflacrosse.org >; Reinhart, David < Reinhartd@cityoflacrosse.org >

Subject: FOR REVIEW - CSM Jackson St & 4th St (City Brewery)

Good afternoon,

Attached is a CSM filed with the City for property at 1130, 1128, 1126, 1120, 1116, 1114, 1112, & 1102 4th St S, and 325 & 327 Jackson St, in the City of La Crosse.

Sondra Craig (she/her)

Assistant Clerk
La Crosse City Clerk's Office
400 La Crosse Street
La Crosse WI 54601
608-789-7549
craigs@cityoflacrosse.org

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

City Clerk

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 10 day of May 20 21. Storm X Sewer X Brund M 3m Water 🗵 **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.