TOWN OF RIVER FALLS

Certified Survey Map Review Application

To be filed with the Town of River Falls Plan Commission along with the certified survey map.

Name:		Phone:	
Address:			
Application submitted	by:	Phone:	
Location of property or	r legal description: Section	, Town, Rang	ge
Lot size:	, Zoning district:	, Current u	se:
Improvements:	Eas	ements:	
Town Zoning Adm	inistrator: signature:		date:
Comments:			
Pierce County Dep	artment of Land Management of	contact person: signature:	
date: Co.	mments:		
Department of National	ural Resources: Comments:		
			date:
• City of River Falls	Zoning Administrator: signature		date:
	consult with the City Zoning Admi e Plat Review Area (see Zoning Adm		erty is located in the Extra
I certify that the inform	nation I have provided in this ap	oplication is true and a	ccurate.
Signed:	Date:		
Include \$ fee	e payable to Town of River Fall	S.	
Date filed:	Action taken:		

Certified Survey Map Approval

Check List

1.	Meet with Town officials for their recommendations.				
	• Zoning Administrator: _		Phone #		
2.	Meet with Pierce County and	City of River Falls zoning officia	als for their recommendations.		
	• County Zoning Office:	Pierce County Courthouse.	Phone # 273-6747		
	· · · · · · · · · · · · · · · · · · ·	or: River Falls City Hall. rty is located in the Extra Territorial Zone)	Phone # 425-0900		
3.	Contact the Department of Na Plain restrictions.	atural Resources if required by Z	oning Administrator due to Flood		
	•		Phone #		
4.	Have a preliminary certified so	urvey map drafted.			
	• Contact your surveyor: _		Phone #		
5.	. Get your request on a Town of River Falls Plan Commission agenda at least 14 days before the Commission meets. (Meetings are held the first and third Mondays at 6:30 P.M.) The applican or a representative with significant knowledge of the CSM must be present. The Zoning Administrator will direct the Town Clerk of when to place your request on a Town of River Falls Plan Commission agenda.				
6.	Get Town Board approval.				