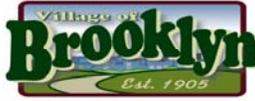




Village of Brooklyn
Certified Survey Map (CSM) Application
210 Commercial Street, P.O. Box 189
Brooklyn, WI 53521
608-455-4201/fax 455-1385

clerk@brooklynwi.gov or deputyclerk@brooklynwi.gov

| Contact Information | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|
| Property Owner Name | Surveyor Name and Company |
| Owner phone | Surveyor Phone |
| Address | City, State, Zip |
| Email | Fax |
| Best Way to reach me is: Phone Email | I am the: Owner Tenant Representative |
| Procedure | |
| <ul style="list-style-type: none"> <input type="checkbox"/> Pick up application. Read through expectations in ordinances 111-54, 111-85 & 111-202, WI States., Sec. 236.34. <input type="checkbox"/> Meet with Village officials (zoning inspector) to discuss planned use and necessary submittals. <input type="checkbox"/> Completed application - paper copy and a pdf version emailed to clerk's office 21 days before Plan Commission Meeting. <input type="checkbox"/> Attend Plan Commission meeting at which application will be considered. <input type="checkbox"/> Plan Commission <u>must act</u> within 90 days of the date of the receipt by the Clerk's Office <input type="checkbox"/> Plan Commission meeting held. Date: _____ | |
| Reference Materials – www.brooklynwi.gov | |
| Village Ordinance Chapter 111-54, 111-85, 111-202 Zoning Map Wis Stats. 236.34 | |
| Property Information | |
| Property Address: _____ Lot or Block#: _____ Subdivision: _____ Tax Parcel#: _____ Total Acreage: _____ Current Use of Property: _____ Proposed Use of Property: _____ Current Zoning: _____ Current Conditional Use Permit in Place? _____ If Residential: Number of Dwelling Units _____ | |



Submittals

All applicable items/documents must be submitted via email in pdf format and 1 paper copy to the clerk’s office at clerk@brooklynwi.gov and deputyclerk@brooklynwi.gov

Map – Must include:

- Lots: location, size, shape & proposed use, prepared in accordance with 236.34 Wi. Stats
- Title plan with name & address of current property owner
- Date of the original plan & latest revision of the plan
- North arrow, dimensions with bearing & distance
- All property lines & existing & proposed right-of-way lines
- All existing & proposed easement lines & dimensions
- Proposed location of structures, paved areas, parking & loading areas
- All required building setback lines
- Location of all access points
- Location of all outdoor storage areas

Environmental Assessment Checklist (Ordinance 111-202) if over 5 acres

Letter of Intent

Letter of Intent should describe, in detail, what the property will be used for. Include the purpose for the request, construction schedules, names of people involved (applicant, owner, contractor, architect, landscaper, business manager)

The Plan Commission is required to base its decision on whether the applicant demonstrated that the proposed CSM will meet the standards of Village of Brooklyn Ordinance Chapter 111 and Wis. Stats. Chapter 236.34. Include any additional information that you wish to submit in support of the requested action.

Owner’s Signature – Statement of Understanding

By signing below, I _____, certify that the information contained in this application is true and accurate to the best of my knowledge, and understand that a deliberate misrepresentation of information may be grounds for denial or reversal of this application, and/or revocation of any approval already awarded based on this application.

I also authorize the Village of Brooklyn staff permission to view and enter the subject property for the purpose of reviewing and investigating this request.

I understand that the submittal of this application and payment of the proper fees does not mean that approval of the CSM is imminent and guaranteed.

I understand that approval of a CSM does not quality as, nor replace the necessity for proper permitting for the proposed project.

Signature of Applicant

Date

Printed Name

Title



VILLAGE OF BROOKLYN

ENVIRONMENTAL ASSESSMENT CHECKLIST

| | |
|---------|------------|
| Project | Owner Name |
| | |

Environmental Assessment Checklist

If checked, please explain in detail by attaching maps and supporting documentation describing the impacts of the proposed development. Ordinance 111-202

Land Resources

- Changes in relief and drainage patterns (attach a topographic map showing, at a minimum, two-foot contour intervals)
- A floodplain. (if yes, attach two copies of a typical stream valley cross-section showing the channel of the stream, the 100-year floodplains limits and the floodway limits (if officially adopted), of each side of the channel and a cross-section of area to be developed).
- An area of soil instability – greater than 20% slope and/or organic soils, peats, or mucks at or near the surface.
- Prime agricultural land (Class I, II or III soils).
- Wetlands and mapped environmental corridors.

Water Resources

- A location within an area traversed by a navigable stream or dry run.
- Lake frontage.

Human and Scientific Interest

- An area of archeological or geological interest.
- An area of historical interest.
- An area of buildings or monuments with unique architecture.

Energy, Transportation and Communications

- Does the development encompass any future street appearing on the Village of Brooklyn Official Map?
- Is the development traversed by and existing or planned utility corridor (gas, electricity, water, sewer interceptor, communications, storm sewer)?

Comments:



Office Use Only

Date Received: _____ By: _____ Parcel#: _____
 Referred to: _____ Fee: _____ Check# _____
 Post Hearing Notice _____ By: _____
 CSM Recorded at County. Sent on _____ By: _____ Returned: _____

Office Use Only – Materials Sent To:

| | Date Sent: | Return By: | Response: |
|------------------------------|------------|------------|-----------|
| Zoning Administrator | _____ | _____ | _____ |
| Building Inspector | _____ | _____ | _____ |
| Public Works | _____ | _____ | _____ |
| Police Department | _____ | _____ | _____ |
| Fire Inspector | _____ | _____ | _____ |
| EMS | _____ | _____ | _____ |
| Village Engineer | _____ | _____ | _____ |
| Village Attorney (as needed) | _____ | _____ | _____ |

Approvals

Plan Commission meeting date: _____

Your request has been: Approved Not Approved
 Approved with these Conditions:

Village Board meeting date: _____

Your request has been: Approved Not Approved
 Approved with these Conditions: