

**BARRON COUNTY
APPLICATION FOR REVIEW OF
CSM AND PLAT SUBDIVISIONS**

This application shall be completed and submitted with the proposed land division. The application must be signed by the property owner of record.

1. Requested by: _____

2. Parcel Number(s) affected:

Attach remainder parcel areas of less than 19 acres
to parcel number:

_____-_____-_____-_____
_____-_____-_____-_____
_____-_____-_____-_____

_____-_____-_____-_____

by signing form, owner consents to the above attachment

3. Intended Use (circle lot type and use, enter lot number)

Lot/Outlot ____ agricultural, business, commercial, industrial, residential, conservancy
Lot/Outlot ____ agricultural, business, commercial, industrial, residential, conservancy
Lot/Outlot ____ agricultural, business, commercial, industrial, residential, conservancy
Lot/Outlot ____ agricultural, business, commercial, industrial, residential, conservancy

4. Property Owner

Name (print): _____ Signature: _____

Mailing Address: _____

Phone number: _____

5. Surveyor

Name: _____

6. Fee Required: \$ _____

Fee Submitted: Yes No

Below for County use only:

Zoning Committee decision required: Yes No If yes, meeting date: _____

Date received:

Date approved: