

Affidavit of Correction Town of Eagle (Waukesha County), Wisconsin

Version: February 18, 2021

Town of Eagle
820 E. Main Street
Eagle, WI 53119

Overview: An affidavit of correction is a legal instrument that is used to correct or otherwise modify a subdivision plat or certified survey map (CSM). The Town must approve any changes relating to areas dedicated to the public or any restrictions for the public benefit.

Governing regulations. The procedures and standards governing the review of this application are found in s. 236.295, Wis. Stats.

General instructions: Complete this application and submit one copy to the Town Clerk along with the application fee noted below. Alternatively, you can submit your application online at <https://townofeagle.zoninghub.com>.

Before you formally submit your application, you may meet with the Town Planner who can answer any questions you may have. You may also ask the Town Planner to review your application before it is formally submitted to determine if it is complete and provides enough information to describe the circumstances related to this application. If you have any questions, do not hesitate to contact the Town Planner at (920) 728-2814 or via email at tim.schwecke@civitekconsulting.com.

Application fee: \$100 plus \$250 escrow

Application submittal deadline: The Plan Commission and Town Board meet jointly, generally the first Monday of the month, to review certain types of development applications. This application must be submitted and determined to be complete by the Town Planner, no later than 30 days prior to the date established for the Plan Commission-Town Board meeting. Please contact the Town Planner to verify the deadline for a specific month.

1. **Applicant and agent information** Include the names of the agent, if any, that helped prepare this application including the supplemental information. Examples include surveyors, engineers, landscape architects, architects, planners, and attorneys.

	<u>Applicant</u>	<u>Agent</u>
Name	<hr/>	<hr/>
Street address	<hr/>	<hr/>
City, state, zip code	<hr/>	<hr/>
Daytime telephone	<hr/>	<hr/>
Email address	<hr/>	<hr/>

2. **Professional surveyor** Include the name and contact information for the professional land surveyor that has or will be preparing the affidavit of correction.

	<u>Professional land surveyor</u>	<u>Agent</u>
Name	<hr/>	<hr/>
Street address	<hr/>	<hr/>
City, state, zip code	<hr/>	<hr/>
Daytime telephone	<hr/>	<hr/>
Email address	<hr/>	<hr/>

3. **Type of Survey**

Certified survey map number _____ **OR** Subdivision name _____

4. **Describe the proposed change to the certified survey map or subdivision.** Include the page/sheet number(s) where the provision is found.

5. Other information. You may provide any other information you feel is relevant to the review of your application.

6. Applicant certification

- I certify that all of the information in this application, along with any attachments, are true and correct to the best of my knowledge and belief.
- I understand that I may be charged additional fees (above and beyond the initial application fee) consistent with the Town's chargeback policy. The signed chargeback form is attached.
- I understand that submission of this application authorizes town officials, Plan Commission members, Town Board members, employees, and other designated agents to enter the property to conduct whatever site investigations are necessary to review this application. This does not authorize any such individual to enter any building on the subject property, unless such inspection is specifically related to the review of this application and the property owner gives his or her permission to do so.
- I understand that this application and any written materials relating to this application will become a permanent public record and that by submitting this application I acknowledge that I have no right to confidentiality. Any person has the right to obtain copies of such written materials or view it online.
- I understand that the Town Planner will review this application to determine if it contains all of the required information. If he or she determines that the application is incomplete, it will not be scheduled for review until it is deemed to be complete.

Applicant Signature(s):

Date:
