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

**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 or to the Town Planner via email (rleto@waukeshacounty.gov.). Alternatively, you can submit your application online at <a href="https://townofeagle.zoninghub.com">https://townofeagle.zoninghub.com</a>. An application fee is also required. An invoice number will be provided to you after the initial intake review to pay the required application fee. A Professional Reimbursement Form is required prior to the application being considered complete.

Before you formally submit your application, you may meet with the Town Planner who can answer any questions you may have. The Town Planner can also 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 (262) 548-7813 or via email at <a href="mailto:rleto@waukeshacounty.gov">rleto@waukeshacounty.gov</a>.

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.

		,,,	s, planners, and attorneys.	
	Applicant		Agent	
Name				
Street address	3			
City, state, zip code		_		
Daytime telephone				
Email address	3			
<ul> <li>Professional survey correction.</li> </ul>	or Include the name and conta	act information for the profession	nal land surveyor that has or will be pre	paring the affidavit of
	Professional land survey	or	Agent	
Name	•			
Street address	3			
City, state, zip code	·			
Daytime telephone				
Email address				
. Type of Survey				
Certified survey map n	umber OR	Subdivision name		
. Describe the propos	ed change to the certified su	rvey map or subdivision. Incl	ude the page/sheet number(s) where t	he provision is found.

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5. Other information. You may provide any of	other information you feel is relevant to the review of your application.
6. Applicant certification	
I certify that all of the information in this appli	ication, along with any attachments, are true and correct to the best of my knowledge and belief.
I understand that I may be charged additional.  The signed chargeback form is attached.	al fees (above and beyond the initial application fee) consistent with the Town's chargeback policy.
other designated agents to enter the property	ion authorizes town officials, Plan Commission members, Town Board members, employees, and y to conduct whatever site investigations are necessary to review this application. This does not uilding on the subject property, unless such inspection is specifically related to the review of this or her permission to do so.
	itten materials relating to this application will become a permanent public record and that by at I have no right to confidentiality. Any person has the right to obtain copies of such written materials
	ew this application to determine if it contains all of the required information. If he or she determines be scheduled for review until it is deemed to be complete.
Applicant Signature(s):	Date:
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