

**TOWN OF POLK**  
**Application for a Certified Survey Map Approval/Minor Land Division**

Owner of site: \_\_\_\_\_

Address or legal description of site to be divided: \_\_\_\_\_

Tax Key #:

Section #:

Zoning:

*Please describe the project below or attach a separate sheet if necessary:*

Applicant Signature(s): \_\_\_\_\_ Date: \_\_\_\_\_

Applicant Telephone Number: \_\_\_\_\_ Applicant E-Mail: \_\_\_\_\_

Applicant Address: \_\_\_\_\_ Phone: \_\_\_\_\_

**Please file the following items with the Zoning Secretary at least seven (14) days prior to the Plan Commission meeting (first Tuesday, 7:30 p.m. of each month)**

- 10 Copies of the Certified Survey Map
- 10 Copies of the Application
- Application and Administration Fee of \$ 100.00  
Plus \$100 per lot. Admin fee \$30

**Office Use**

Date filed: \_\_\_\_\_ Accepted by: \_\_\_\_\_

Preliminary meeting date: \_\_\_\_\_ Plan Commission Agenda date: \_\_\_\_\_

Plan Commission: Approved/Amended/Denied Date: \_\_\_\_\_

Town Board: Approved/Amended/Denied Date: \_\_\_\_\_ Date filed with County: \_\_\_\_\_