



## **APPLICATION: CERTIFIED SURVEY MAP REVIEW FORM**

To: Planning Commission, City of Kaukauna, Outagamie County, WI

### **Petitioner Information:**

Name: KAUKAUNA AREA SCHOOL DISTRICT - CHRIS MCDANIEL

Mailing Address: 1701 COUNTY RD CE, KAUKAUNA, WI 54130

Phone Number: [REDACTED]

Email: [REDACTED]

### **Property Owner Information (If Not Petitioner):**

Name: SAME AS PETITIONER - SEE ABOVE

Mailing Address: SAME AS PETITIONER - SEE ABOVE

Phone Number: SAME AS PETITIONER - SEE ABOVE

Email: SAME AS PETITIONER - SEE ABOVE

**Property Information:**

Site Address/Location: PARCELS 323246800 / 323246700 / 323246600 / 323246500 / 323246400

Lot Dimensions and Area: 137.965 TOTAL ACRES

Current Zoning: RESIDENTIAL

Number of Lots to be Created: THREE (3)

**If multiple owners are involved, please add all additional owner information on an attached document.**

**Please State Reason(s) for Certified Survey Map Review Request:**

THIS CERTIFIED SURVEY MAP IS SUBMITTED TO SUPPORT THE DEVELOPMENT OF A NEW MIDDLE SCHOOL ON LOT 2. THE CSM WILL DEDICATE REQUIRED RIGHT-OF-WAY FOR PUBLIC ROADS AND INFRASTRUCTURE, CREATE A LEGALLY DEFINED LOT FOR THE SCHOOL SITE, AND CLEARLY IDENTIFY THE REMAINING REMNANT PARCELS ADJACENT TO THE DEVELOPMENT.

**Additional Requirements:** For Certified Survey Map review, professionally drawn maps are required to be submitted. These maps must include all structures, lot lines, and streets with distances to each. Maps should be drawn to a scale of not less than 1":1,000'. Additional information may also be requested as may be appropriate per the proposal being made.

**Lot Division by Certified Survey Map (1-4 lots) Fee Schedule:** \$10.00/lot based on total lots

**Please Note:** Certified survey map reviews often require action by multiple governmental bodies. Between multiple meetings and statutory requirements for public hearings and noticing of meetings, sometimes reviews and authorizations can take more than 30 days. Please let staff know of your request as early as possible if you have a specific deadline that you need Plan Commission authorization by.

**Signature of Petitioner:**



**Signature of Owner (If Not Petitioner):** SAME AS PETITIONER - SEE ABOVE

**Date Submitted to City of Kaukauna:** 12/19/2025

Please submit by email to [planning@kaukauna.gov](mailto:planning@kaukauna.gov) or by mail to:

City of Kaukauna  
Attn: Plan Commission  
P.O. Box 890  
Kaukauna, WI 54130

**FOR DEPARTMENT USE ONLY:**

Date Application Received: 12/19/2025

Payment Received: Submitted, not yet received

Payment Receipt #: Not available

Site Plan Reviewed: CSM reviewed

1<sup>st</sup> Notice Sent: Not applicable

2<sup>nd</sup> Notice Sent: Not applicable

Plan Commission Approval:

Common Council Approval:

Signature of Planning & Community Dev. Staff:

