

Village of Mukwonago  
440 River Crest Ct  
Mukwonago, WI 53149  
Phone: (262) 363-6420  
Fax: (262) 363-6425  
[www.villageofmukwonago.com](http://www.villageofmukwonago.com)

# VILLAGE OF MUKWONAGO

## PRELIMINARY PLAT REVIEW APPLICATION

Application Fee: \$200 + \$16 per lot

Date Submitted: \_\_\_\_\_

### CONTACTS

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#### Zoning and Planning Department

Contact:  
Phone: (262) 363-6420 ex 2111  
Fax: (262) 363-6425  
Email: [planner@villageofmukwonago.com](mailto:planner@villageofmukwonago.com)

### GUIDELINES

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It is recommended that, prior to the filing of an application for the approval of a preliminary plat, the subdivider should first inform the Village Clerk of the subdivider's plans and then consult with the Zoning Administrator, the Village Engineer and/or the Village Planner in order to obtain advice and assistance.

The undersigned petition is to consider a request, as stated herein, for the specified parcel(s) of land and will be reviewed by the Plan Commission and Village Board of the Village of Mukwonago. The application packet must be filed with the Village Clerk **at least 30 days prior to the meeting** of the Planning Commission at which action is desired. The Plan Commission meets on the second Tuesday of each month at 6:30 p.m.

Materials listed below must be provided to the Village of Mukwonago in accordance with Village Municipal Code Chapter 45 Article II. and other pertinent sections of Village ordinances, State statutes and as necessary to permit review that is consistent with proper planning practice. The Village will strive to accommodate reasonable requests for informal conceptual review, however the Village shall not place any items on the agenda for Plan Commission consideration until such time as the application is complete in accordance with all requirements specified on this and other attached application forms. In the case of a preliminary plat the submittal date, for the purposes of WI Stats. Chapter 236, is the date that the entire application packet is completed (as dated below by Village Staff).

Mail completed applications to: Village Planner  
ATTN: Preliminary Plat Review  
440 River Crest Ct  
Mukwonago, WI 53149

Deliver to: Village Clerk's Office  
440 River Crest Ct

Email to: [planner@villageofmukwonago.com](mailto:planner@villageofmukwonago.com)

Complete, accurate and specific information must be entered. Please Print.

### APPLICANT (*Full Legal Name*)

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Name: \_\_\_\_\_

Company: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

**APPLICANT IS REPRESENTED BY (Full Legal Name)**

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Name: \_\_\_\_\_  
Company: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Daytime Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
E-Mail: \_\_\_\_\_

**ARCHITECT**

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Name: \_\_\_\_\_  
Company: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Daytime Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
E-Mail: \_\_\_\_\_

**PROFESSIONAL ENGINEER**

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Name: \_\_\_\_\_  
Company: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Daytime Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
E-Mail: \_\_\_\_\_

**REGISTERED SURVEYOR**

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Name: \_\_\_\_\_  
Company: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Daytime Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
E-Mail: \_\_\_\_\_

**CONTRACTOR**

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Name: \_\_\_\_\_  
Company: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Daytime Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
E-Mail: \_\_\_\_\_

## PROPERTY INFORMATION

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Property Owner (s) (if different from applicant): \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Present Zoning: \_\_\_\_\_ Tax Key No(s): \_\_\_\_\_

Location/Address: \_\_\_\_\_

Present Use: \_\_\_\_\_ Intended Use: \_\_\_\_\_

## PROCEDURAL CHECKLIST FOR PRELIMINARY PLAT REVIEW AND APPROVAL

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Submittals for review must include and be accompanied by the following:

### Application:

- Completed application form including the procedural checklist.
- Application fee: \$200 + \$16 per lot
- Agreement for Reimbursable Services (separate application).

### Other Documents:

- Project Summary: Please attach a statement detailing the reasons and background for this request. **PLEASE EXPLAIN IN DETAIL.**
- The following number of full sets of plat:
  - Two (2) copies are required for staff.
  - Four (4) copies are required for each County Planning Commission.
  - Two (2) copies are required if shorelands or wetlands are involved.
  - Two (2) copies are required if abutting a highway.
  - Two (2) copies are required for SEWRPC.
  - Three (3) copies are required for the utilities.
  - One (1) copy is required for each school district.
- Electronic Submittals are required.** Email (or CD ROM) with all plans and submittal materials in Adobe PDF to [planner@villageofmukwonago.com](mailto:planner@villageofmukwonago.com).
- Any additional information as determined by Village staff.

## CERTIFICATION

Applicant hereby certifies that:

1. All of the above statements and other information submitted as part of this application are true and correct to the best of his or her knowledge.
2. Affirms that no Village of Mukwonago elected or appointed official or employee has a proprietary interest in the above referenced property for which this applications being filed (except as stated below under "Exceptions").
3. None of the above referenced individuals has been promised or given any contract for consultation, planning or construction in relation to this project (except as stated below under "Exceptions").
4. Applicant has read and understands all information in this packet.

Applicant further understands the policies of the Village regarding change of zonings and property development. Conditions of the resolution regarding all approvals are strictly followed. Certificates of Occupancy are not given until all conditions of approval have been met

By the execution of this application, applicant hereby authorizes the Village of Mukwonago or its agents to enter upon the property during the hours of 7:00 am to 7:00 pm daily for the purpose of inspection. Applicant grants this authorization to enter even if this land has been posted against trespassing pursuant to Section 943.13 WI Stats.

*(The applicant's signature must be from a Managing Member if the business is an LLC, or from the President or Vice President if the business is a corporation. A signed applicant's authorization letter may be provided in lieu of the applicant's signature below, and a signed property owner's authorization letter may be provided in lieu of the property owner's signature[s] below. If more than one, all of the owners of the property must sign this Application).*

\_\_\_\_\_  
Signature - Property Owner

\_\_\_\_\_  
Signature - Applicant

\_\_\_\_\_  
Name & Title (PRINT)

\_\_\_\_\_  
Name & Title (PRINT)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature - Property Owner

\_\_\_\_\_  
Signature – Applicant's Representative

\_\_\_\_\_  
Name & Title (PRINT)

\_\_\_\_\_  
Name & Title (PRINT)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

FOR OFFICE USE ONLY	
<b>Date Paid</b>	<b>Receipt #</b>
<b>Plan Commission Date(s)</b>	<b>Village Board Date(s)</b>
<b>Escrow Required?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Escrow Amount</b>
<b>Plan Commission Disposition</b>	
<b>Village Board Disposition</b>	