

**ADMINISTRATOR'S CHECKLIST FOR DISTRIBUTION OF  
PRELIMINARY PLATS FOR MARATHON COUNTY**

1. Name of Subdivision: \_\_\_\_\_
2. The subdivision is located within the Town of \_\_\_\_\_  
& within the extraterritorial jurisdiction of \_\_\_\_\_  
(City or Village)
3. Subdivision abuts or adjoins a state trunk highway ..... Yes  ..... No   
Subdivision abuts / adjoins a county trunk highway..... Yes  ..... No
4. The subdivision is served by public sewer..... Yes  ..... No
5. The subdivision abuts a county park or parkway..... Yes  ..... No

|   |   |                                     |
|---|---|-------------------------------------|
| <b>Conditions Affecting # Of Copies<br/>To Be Distributed</b> (Preliminary Plat only) | <b># Full Size Copies<br/>Transmitted</b><br>(Circle if Applicable) | <b>Copies To Be Sent By CPZ To:</b> |
|---|---|-------------------------------------|

**All State and County Plats:**

|  |   |                             |
|--|---|-----------------------------|
| County distribution .....                                      | 4 | County Zoning (CPZ) Office  |
| Subdivision jurisdiction (See #2 above) .....                  | 2 | Town Clerk's Office         |
| Subdivision extraterritorial jurisdiction (See #2 above) ..... | 2 | City/Village Clerk's Office |

**State Plats only:**

|  |   |                                    |
|--|---|------------------------------------|
| All Plats .....  | 2 | Department<br>of<br>Administration |
| Subdivision abuts or adjoins a state trunk highway<br>or connecting street or county highway ..... | 2 |                                    |
| Subdivision not served by public sewer and<br>no provision has been made .....                     | 2 |                                    |

**Also Copies To:**

|   |   |                           |
|---|---|---------------------------|
| Subdivision abuts County Park or Parkway..... | 1 | _____                     |
| County Highway Department .....               | 1 | _____                     |
| School District .....                         | 1 | _____                     |
| Utilities: .....                              | 1 | Telephone Co.: _____      |
| .....   | 1 | Electric Co.: _____       |
| .....   | 1 | Gas Co.: _____            |
| .....   | 1 | Cable Co.: _____          |
| .....   | 1 | Brad Johnson – Wausau DNR |

Other .....

**Total Number of Copies Submitted** \_\_\_\_\_

*Note: Final plat submittal requires four full-size prints and one reduced (11" x 17" or smaller) copy*

Submitter signature: \_\_\_\_\_ Date \_\_\_\_\_

Submitter (company) name and address \_\_\_\_\_

- \_\_\_\_\_ Department of Administration, Plat Review submittal form & fee
- \_\_\_\_\_ Total number of copies sent to Plat Review
- \_\_\_\_\_ Department of Commerce, Safety & Buildings forms & fee
- \_\_\_\_\_ Department of Transportation, form & fee

**PROVIDE ANY COMMENTS REGARDING THIS PLAT TO:**

Marathon County CPZ, 210 River Drive, Wausau WI 54403-5449  
(715) 261-6020 or 6021, Fax (715) 261-6016

**PRIOR TO:** \_\_\_\_\_

I hereby certify that I am full time county administrator of zoning regulations. Enclosed are the required copies of this plat submitted by me as Clerk of the Marathon County Planning Agency (Land Conservation & Zoning Committee).

James Burgener, Marathon County Conservation, Planning & Zoning Department

Date \_\_\_\_\_

Surveyor To Complete This Entire Section