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| **Request for****Scale Waiver****Plat Review****Department of Administration** |  Plat Review – DOA **Mailing Address:** PO Box 1645, Madison WI 53701 **Phone:** 608-266-3200 **Email:** plat.review@wi.gov  **Web:** <https://doa.wi.gov/platreview>  |
| Subdivision Name or other map reference:  |
| County:  |
|  | **Surveyor, Company & Shipping Address:** Name:  |
|  |  Company:  |
|  | Shipping Address:  |
|  |   |
|  |  Phone:  |
|  |  Fax:  |
|  |  Email:  |
|  |  Date:  |
| 1. Proposed scale greater than 1" = 100' (1" = 500' for CSM's) :  |
| 2. Identify portions of map with proposed scale (or "all"):  |
| 3. **Include full size copy of map drawn at proposed scale.** |
| **SCALE WAIVERS**When strict compliance with the scale requirements of [s. 236.20 (1) (a), Wis. Stats.](https://docs.legis.wisconsin.gov/document/statutes/236.20%281%29%28a%29), will render the plat or CSM difficult to read, Plat Review may waive suchstrict compliance as allowed for by [s. 236.20 (2) (L), Wis. Stats.](https://docs.legis.wisconsin.gov/document/statutes/236.20%282%29%28L%29)Plat Review will determine that all boundary and other data shown on the plat or CSM is legible at the proposed scale, and may require the use of detail drawings or other methods to ensure legibility prior to granting a waiver. |
| Receipt & Transmittal Record | Shaded Area for Office Use Only |
| Date Received:  | Date of reply:  | [ ]  Filed with plat  DOA file #  |
| Copies Sent: [ ]  Municipality [ ]  County | [ ]  Filed in Counties |
|  |  | By:  Date:  |
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