

Map Request Form

Land Information Department

(Please complete all pertinent information to insure prompt and efficient action by the Land Information Department!)

APPLICANT INFORMATION

NAME: _____
 ADDRESS: _____
 CITY/STATE/ZIP: _____
 DAYTIME PHONE: _____
 ADDITIONAL INFORMATION: _____
 REQUEST DATE: ____/____/____

SITE INFORMATION (Please Fill in what you know.)

TAX PARCEL #: _____ LOT AREA: _____
 TOWNSHIP: _____ PART OF ____ ¼ - ____ ¼,
 SECT. _____, TWNSHP ____ N, RANGE ____ W
 PROPERTY ADDRESS: _____
 CITY: _____ STATE: ____ ZIP: ____

INFORMATION REQUESTED (CHECK THE BOX NEXT TO THE PRODUCT REQUESTED)

	PICK-UP	MAILED
<input type="checkbox"/> Print Screen – Tax Files	\$ 1.00	1.50
<input type="checkbox"/> CD'S Aerials / Quads	\$ 100.00	105.00
<input type="checkbox"/> Shape Files (Each)	\$ 20.00	25.00
<input type="checkbox"/> FAXES OR E-MAIL	\$ 5.00	5.00
<input type="checkbox"/> 911 Maps (Towns & Emergency Depts.)	\$ 8.00	9.00
(All other Users)	\$ 13.00	14.00
Plot Map (Color)		
<input type="checkbox"/> A (8.5X11)	\$ 3.50	4.00
<input type="checkbox"/> B (11X17)	\$ 5.50	6.00
<input type="checkbox"/> C (17X22)	\$ 6.00	7.00
<input type="checkbox"/> D (22X34)	\$ 13.00	14.00
<input type="checkbox"/> E (34X44)	\$ 20.00	22.00
Aerial Photos (B/W & Full Color Maps) (Zoning, Ward)		
<input type="checkbox"/> A (8.5X11)	\$ 5.00	5.50
<input type="checkbox"/> B (11X17)	\$ 7.00	7.50
<input type="checkbox"/> C (17X22)	\$ 18.00	19.00
<input type="checkbox"/> D (22X34)	\$ 25.00	26.00
<input type="checkbox"/> E (34X44)	\$ 36.00	37.00
<input type="checkbox"/> Custom Printing Request on Plotter	\$ 13.00 /Lin Ft	
<input type="checkbox"/> Custom Mapping Projects	\$ 50.00/Hr & Material	

ITEMS TO BE INCLUDED ON MAP: (PLEASE CHECK EACH THAT APPLY)

- | | |
|--|--|
| <input type="checkbox"/> PARCEL NUMBER | <input type="checkbox"/> OWNER NAME |
| <input type="checkbox"/> PARCEL LINES | <input type="checkbox"/> PARCEL DIMENSIONS (Approximate) |
| <input type="checkbox"/> PARCEL SIZE (ACRES/ S.F.) | <input type="checkbox"/> SECTION LINES |
| <input type="checkbox"/> ROAD INFORMATION (CTR LINE/ NAME) | <input type="checkbox"/> OTHER: _____ |
| <input type="checkbox"/> MUNICIPAL LIMIT LINES | _____ |

DESCRIPTION OF PRINTOUT:
 (FOR EXAMPLE: FIT ALL 300 ACRES ON 8 1/2 X 11 SHEET, OR ROUGHLY 1" = 100' SCALE, OR ETC.)

PLEASE RETURN TO ME BY: (CIRCLE ONE)

FAX (____) _____
 E-MAIL (ADDRESS) _____
 PHONE (____) _____
 MAIL (Use Above Address)
 I WILL PICK IT UP WHEN NOTIFIED

DEPARTMENT USE ONLY

DATE RECEIVED ____/____/____
 DATE COMPLETED ____/____/____
 COMPLETED BY: _____

NOTE: All requests must be paid for in advance unless you have an existing account with the Department.
 Mail requests with payments to: Administrative Center, Land Information, 212 6th St. N., La Crosse, WI 54601
 Rev. 03-28-16 (saved in S: Land Info. Documents/LIO Dept Map request form)