

**Results of Land Division Review**

Date of Review \_\_\_\_\_

Ref. No. \_\_\_\_\_

**TO: Albany Town Board  
N6065 CTH "E", Albany, WI 53502  
(608) 862-3000**

**Landowner:** Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_

**Applicant/Developer (if different from Owner):**  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email: \_\_\_\_\_

**FROM: Town of Albany Planning Commission**

**SUBJECT: Review of:**  CSM  Preliminary Plat  Final Plat  Other \_\_\_\_\_

**Located** (by ¼ Section(s), Section(s) and public/private road name if possible):  
\_\_\_\_\_

**Site Visit?**  NO  Yes

**RECOMMENDATION:**

The Town of Albany Planning Commission has reviewed this proposed development in accordance with the Town of Albany Planning Commission Ordinance and hereby recommends that the Albany Town Board take the following action this development:

Approve  Conditionally Approve (see below)  Reject

Conditions of Approval:

1. \_\_\_\_\_  
\_\_\_\_\_
2. \_\_\_\_\_  
\_\_\_\_\_
3. \_\_\_\_\_  
\_\_\_\_\_
4. \_\_\_\_\_  
\_\_\_\_\_

Respectfully Submitted: \_\_\_\_\_ Chair, Albany Planning Commission  
Updated 1/04