



Graffiti Removal Application

Department of Planning and Community and Economic Development
Neighborhood Preservation and Inspection Division
215 Martin Luther King, Jr. Blvd. LL-100
Madison, WI 53703

Address of Graffiti: _____

Location:

- Commercial Building
- Residential Building
- Fence
- Retaining Wall
- Sidewalk
- Other: _____

Surface:

- Brick
- Block
- Concrete
- Fiberglass
- Glass
- Metal
- Pebble Coat
- Plastic
- Stucco
- Wood
- Vinyl
- Other _____

Approximate Size of Removal Area: _____ (ft.) by _____ (ft.)

<p>Local Agent to be Contacted: [Please Print]</p> <p>Name: _____</p> <p>Address: _____</p> <p>Daytime Phone () _____</p> <p>Evening Phone () _____</p>	<p>OR</p> <p>No further contact required. Proceed with removal .</p>
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I certify that I am either the owner of the property where graffiti removal is requested or I am authorized by the owner to contract for the graffiti removal.

Signature: _____ **Date:** _____

*This application must be accompanied by a \$100.00 co-pay fee. Checks should be made to the **City Treasurer**. Cash, VISA, Master Card payments may be made in person at the Neighborhood Preservation & Inspection Division permit counter.*

For Contractor and Contract Use Only

Graffiti Removal Method: _____

Contact Person Signature: _____ **Date:** _____