



CONDOMINIUM APPLICATION
Madison Plan Commission

126 S Hamilton St
 PO Box 2985; Madison, Wisconsin 53701-2985
 Phone: 608.266.4635 | Facsimile: 608.267.8739

**** Please read the application completely and fill in all required fields ****

This application form may also be completed online at www.cityofmadison.com/planning/plan.html

NOTICE REGARDING LOBBYING ORDINANCE: If you are seeking approval of a development that has over 40,000 square feet of non-residential space, or a residential development of over 10 dwelling units, of if you are seeking assistance from the City with a value of \$10,000 (including grants, loans, TIF or similar assistance), then you likely are subject to Madison's lobbying ordinance (Sec. 2.40, MGO). You are required to register and report your lobbying. Please consult the City Clerk's Office for more information. Failure to comply with the lobbying ordinance may result in fines.

1. Project Information.

Name of Proposed Condominium: _____

Address of Proposed Condominium: _____

2. Applicant Information.

Name of Applicant: _____ Representative, if any: _____

Street Address: _____ City/State: _____ Zip: _____

Telephone: () _____ Fax: () _____ Email: _____

Firm Preparing Condominium: _____ Contact: _____

Street Address: _____ City/State: _____ Zip: _____

Telephone: () _____ Fax: () _____ Email: _____

Check only ONE – ALL Correspondence on this application should be sent to: Applicant/ Representative Survey Firm

3. Project Details.

Tax Parcel Number(s): _____

Number of Units (as defined in Wis. Stats. §703.02(15)): _____

Is this condominium expandable? Yes No Are there conveyable limited common elements? Yes No

Purpose (if amended or an addendum): _____

List any proposed private street names: _____

Would you like separate tax bills prepared for individual units for the current tax year (for condos recorded by Oct. 1)? Yes No

Describe any development that will require building permits: _____

Note: This project may be subject to Sec. 28.04 (25), MGO if 10 or more residential units are proposed.

4. Required Submittals. Your application is required to include the following:

- A Copy of the Final Condominium Instrument** as defined in Chapter 703, Wis. Stats.
- Completed Application** and an **Application Fee** of two hundred dollars (\$200). Checks shall be made payable to "City Treasurer."
- Electronic Application Submittal:** All applicants are required to submit a copy of the completed application form and the condominium instrument (plat and/or declaration as applicable) as individual Adobe Acrobat PDF files compiled either on a non-returnable CD-ROM to be included with their application materials, or in an e-mail sent to pcapplications@cityofmadison.com. The transmittal shall include the name of the project and applicant. Applicants unable to provide the materials electronically should contact the Planning Division at 266-4635 for assistance.

The signer attests that the application has been completed accurately and all required materials have been submitted:

Applicant's Printed Name _____ **Date** _____

Applicant's Signature _____

For Office Use Only:	Date Rec'd: _____	Alder. District: _____	Amount Paid: \$ _____
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