City of Madison APPLICATION FOR MINOR ALTERATION OF EXISTING CONDITIONAL USE

FOR OFFICE USE ONLY

				Date:								
			L	NDMAC:								
Str	eet Address:											
Alder District:							Zoning	District:				
Existing Conditional Use:						·						
Proposed Alteration (Describe):												
The	following items a	are require	d to be subn	nitted via en	nail	to SPRap	plication	ns@cityofma	<u>diso</u>	on.com:		
☐ Completed Application (this form)												
	Property Own	er Permission (signature on this form or an email providing authorization to apply)										
		he District Alder recommending approval of the project as a minor alteration. Find the alder of the the property is located.										
	Letter of Inter	t describing the proposed project										
☐ Plans in PDF format												
Fina	itionally, there is l approval is grar oval and is deem	nted by the	Director of	Planning if								-
Project Contact				·		Re	ole					
Person Name Company Name												
Phone						Eı	nail					
	undersigned prop		r (or contrac	ct owner) of	pro	perty belo	w appli	es for approv	al to	o make mi	inor alterat	ions to
	operty Owner A nature (or autho ail)											
Pro	perty Owner N	ame										
Co	mpany Name											
Str	eet address											
Ph	nne			Email								