## **ZTRHP ANNUAL PERMIT RENEWAL**

#### City of Madison Building Inspection Division: Zoning Dept. Madison Municipal Building, Suite 017 215 Martin Luther King, Jr. Blvd. P.O. Box 2984 Madison, WI 53701-2984 *phone*: (608) 266-4551 web: cityofmadison.com/trh email: zoningTRH@cityofmadison.com

## **ZTRHP Annual Permit Renewal Form**

#### **1. LOCATION: of Tourist Rooming House**

Address:

\_\_\_\_\_ Unit #: \_\_\_\_\_

### 2. OPERATOR: of Tourist Rooming House

Operator name

#### **3. CHANGES**

Your initial ZTRHP permit application included, among other items:

- Floor plans of your Tourist Rooming House
- Affidavits for all hosts and cohosts included in your online advertising listings for your TRH •

Each year, operator is required to report any changes to this information before renewal permit can be issued.

CHOOSE ONE:	
<ul> <li>YES, there have been CHANGES to the floor plans and/or aff and/or cohosts listed online since the last time I paid the ann Updated forms showing all changes must accompany this ZTRHP-R form:         <ol> <li>Go here to find all forms: www.cityofmadison.com/dpced/bi/apply/34</li> <li>Select and update only the forms that have changes</li> <li>Save and submit updated forms along with this ZTRHP-R form</li> </ol> </li> <li>NO, there have been NO CHANGES to the floor plans, affidated forms along with the plane.</li> </ul>	ual permit fee. 41/ vit information,
and/or cohosts since the last time I paid the annual permit fe	e.
Operator Signature:	_Date:
ZTRHP Permit Number:	

# **7TRHP-R**



#### FOR OFFICE USE ONLY:

ZTRHP -

Received Date \_\_\_\_\_

ZTRHP-R form approval by \_\_\_\_\_ Date \_\_\_\_\_