

## Residential Parking Permit Program Madison, WI

## PROPERTY OWNER AFFIDAVIT

Madison General Ordinance Section 12.138

## **Instructions:**

Renter should submit this form to their property manager to complete and have notarized.

Once completed, this form should be returned to the Parking Division in person, or by mail: City of Madison Parking Division
Madison Municipal Building
215 Martin Luther King Jr. Blvd., suite 109
Madison, WI 53703

	(Property Manager Name- Please Print)	, being first d	uly sworn, state that:
	(Froperty Manager Name-Frease Frint)		
1)	I am the owner ( ) and/or rental agent ( ) of the following described dwelling unit		
	(Street Address)	, (Apt. #)	(City)
	; and (Telephone Number)		
2) 7	This dwelling unit is presently occupied ( )/rented ( ) to:		
	(Name of Renter)		
			// anager Signature) (Date

Notary Information:

Subscribed and Sworn to before me

This \_\_\_\_\_\_ day of \_\_\_\_\_\_, 20\_\_\_

Notary Public, Dane County, Wisconsin

My Commission Expires: \_\_\_\_\_\_