



Department of Planning & Community & Economic Development
Planning Division

Website: www.cityofmadison.com

Madison Municipal Building, Suite LL100
215 Martin Luther King, Jr. Boulevard
P.O. Box 2985
Madison, Wisconsin 53701-2985
FAX 608 267-8739
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NICHOLAS O LAPER
& KERRY E LAPER
3030 SYENE RD
MADISON, WI 53713-3207

COPY

**NOTICE OF PUBLIC HEARING BEFORE THE COMMON COUNCIL
REGARDING A
BOUNDARY ADJUSTMENT AGREEMENT BETWEEN THE
CITY OF MADISON, WISCONSIN
AND THE
CITY OF FITCHBURG, WISCONSIN**

Notice is hereby given that a resolution authorizing the Mayor and City Clerk to enter into an agreement to adjust the boundary between the City of Madison and City of Fitchburg in the area of 3101 Syene Road will be presented to the Common Council during its regular meeting on **Tuesday, February 5, 2013 at 6:30 P.M.**, in the Council Chambers, Room 201, City-County Building, 210 Martin Luther King, Jr. Blvd., and that the Common Council will then and there consider said resolution and will hold a public hearing to hear all persons interested, or their agents or attorneys, concerning matters contained in said resolution.

ALL PARTIES INTERESTED IN THIS ITEM SHALL REGISTER WITH THE COUNCIL'S SECRETARY BEFORE THE ITEM IS CONSIDERED BY THE COUNCIL.

If you require an interpreter, materials in alternate formats, or other accommodations to access this public hearing, please contact the Engineering Division at phone (608) 266-4751. Please make contact at least twenty-four (24) hours prior to the date of this public hearing so that we can make proper accommodations.



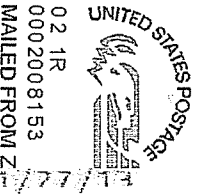
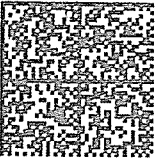
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CERTIFIED MAIL



7099 3400 0004 8293 5142



**RETURN RECEIPT
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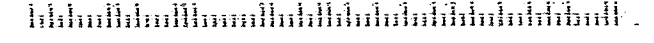
**NICHOLAS O LAPER
& KERRY E LAPER
3030 SYENE RD
MADISON WISCONSIN**

1st NOTICE 1/14
2nd NOTICE 1-21
530 SF 1 00 01/27/14

RETURN TO SENDER
REFUSED
UNABLE TO FORWARD

BC: 53701298585 *0386-12568-07-37

537012985



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
*Thayer Exchange LLC
2625 Research Park Dr
Fitchburg WI 53711-4908*

2. Article Number (Copy from service label)
7099 3400 0004 8293 5081

PS Form 3811, July 1999

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) *Stacy Pete* B. Date of Delivery *1-18-14*
C. Signature *Stacy Pete* Agent Addressee
D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.
4. Restricted Delivery? (Extra Fee) Yes

Domestic Return Receipt

102595-99-M-1789

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1. Article Addressed to:
*Kenneth C Rasmussen
3105 Syene Rd
Madison WI 53713-3209*

2. Article Number (Copy from service label)
7099 3400 0004 8293 5111

PS Form 3811, July 1999

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) *K Rasmussen* B. Date of Delivery *1-18-14*
C. Signature *Ken Rasmussen* Agent Addressee
D. Is delivery address different from item 1? Yes No
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3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.
4. Restricted Delivery? (Extra Fee) Yes