AGENDA ITEM NO. // SUBJECT/ADDRESS/TOPIC Houde Proposal				
YOUR NAME NATHAN WAUTIER DATE 6/18/17				
YOUR ADDRESS 22 East Molfin St. MADISON, WI 63711				
Please check the appropriate boxes:				
□ Support	□ Oppose □	☐ Neither Support Nor Oppose		
☐ Wish to speak (3 min. limit)	☐ Wish to speak (3 min. limit)	☐ Wish to speak (3 min. limit)		
☐ Do not wish to speak	☐ Do not wish to speak	Do not wish to speak		
Available to answer questions	☐ Available to answer questions	☐ Available to answer questions		
At this meeting are you representing an organization or a person other than yourself: No (If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next questions.)				
Name, address and telephone number of each person or organization you are representing:  Howde Property S				
Are you being paid for your representation?		✓ Yes □ No		
Are you appearing as part of your other paid duties for this person or organization?  (If you answered "no" to both these questions, STOP. You need not complete the rest of this form.  If you answered "yes," please continue.)				
Are you an elected official or employee who is appearing solely on behalf of your office or for your municipality or other governmental body?  (If you answered "yes" to the question, STOP. You need not complete the rest of this form except that you must sign this form. If you answered "no" to the question, go on to the next questions.)				
If you are being paid for your representation, or if your appearance is part of other paid duties, please be advised that:				
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3. If your principal spends or will owe more than \$1,000 for lobbying services in any reporting period (calendar six months), the principal must file expense statements with the City Clerk for the remaining quarters of the calendar year.				
(Please go to the City Clerk's website <u>www.cityofmadison.com/clerk/index.html</u> or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information.)				
Date 6/18/12	Signature			

### PLAN COMMISSION PUBLIC HEARING GENERAL INFORMATION

- 1. Applicants or their agents are requested to register, appear, and explain their proposal. Applicants are also requested to remain for questions until their item is voted on.
  - Members of the Commission may have questions of the speakers when they are finished. However, speakers are not required to answer any questions. The Commission will not engage in discussion or debate with the speakers. All questions directed to the Commission shall be addressed to the Chair.
- 2. Public Hearing items may be called at any time after the beginning of the public hearing. The Plan Commission uses a consent agenda, which means that the Commission can consider any item at 6:00 p.m. where there are no registrants wishing to speak in opposition regardless of its placement on the agenda.
- 3. The most effective statements are brief, well organized, and avoid repetition. If you agree with the statement of a prior speaker, please so indicate rather than repeating those statements.
- 4. The Commission is appointed to represent not only those present at the hearing but all citizens. The Plan Commission is advisory to the Common Council on rezoning and subdivision plat matters. On conditional use permits and demolition permits, the Commission makes the final decision after holding a public hearing to consider all facts applicable to the application.

AGENDA ITEM NO. SUBJECT/ADDRESS/TOPIC WITHOUT HOVDE VIII-D				
YOUR NAME MIKE SLAVISH DATE 6/18/2012				
YOUR ADDRESS 122 W. WASHIMGTON MADISON WI 53703				
Please check the appropriate boxes:				
Support □ Oppose □ Neither Support Nor Oppose				
Wish to speak (3 min. limit)				
☐ Do not wish to speak ☐ Do not wish to speak ☐ Do not wish to speak				
☐ Available to answer questions ☐ Available to answer questions ☐ Available to answer questions				
At this meeting are you representing an organization or a person other than yourself:  Yes (If you answered "no," STOP; you need not complete the rest of this form. If you answered "yes," go on to the next questions.)  Name, address and telephone number of each person or organization you are representing:				
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Date Signature				

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AGENDA ITEM NO SUBJECT/ADDRESS/TOPIC					
YOUR NAME STEVE	TOLZHAMER DA'	TE 6-18-12			
YOUR ADDRESS 222 W. WASHINGTON AVE					
Please check the appropriate boxes:					
☐ Support	□ Oppose	☐ Neither Support Nor Oppose			
☐ Wish to speak (3 min. limit)	☐ Wish to speak (3 min. limit)	☐ Wish to speak (3 min. limit)			
☐ Do not wish to speak	☐ Do not wish to speak	☐ Do not wish to speak			
Available to answer questions	Available to answer question	s			
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Name, address and telephone number of each person or organization you are representing:  Hovde Properties  Epostem Uten Architects					
THE STEER WITH PLONE	they o	•			
Are you being paid for your representation?	?	🛭 Yes 🔲 No			
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Date 6/18 /12 Signature / Signature					

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AGENDA ITEM NO: // SU	BJECT/ADDRESS/TOPIC ///	Johnson Haide Fire De		
YOUR NAME VICTOR VILLE	acsez, DATE	6/18/2012		
YOUR ADDRESS 248 ME	adowside Dr Vero	Na. (NT 5389?		
Please check the appropriate boxes:				
Support	☐ Oppose	☐ Neither Support Nor Oppose		
☐ Wish to speak (3 min. limit)	☐ Wish to speak (3 min. limit)	☐ Wish to speak (3 min. limit)		
☐ Do not wish to speak	☐ Do not wish to speak	☐ Do not wish to speak		
Available to answer questions	☐ Available to answer questions	☐ Available to answer questions		
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Are you being paid for your representation?		A 1		
		No No		
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Date 6/8/7017 Signature //www/llan				

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