AGENDA ITEM NO. 16 SU	JBJECT/ADDRESS/TOPIC	312 H. 1	HAMILTO	om st
1	POBEL	DATE		
YOUR ADDRESS 1017 HICH	HOUS DIZIVE	PALEIGH	-	
Please check the appropriate boxes:				
Support	☐ Oppose	□ Neither	Support N	Vor Oppose
☐ Wish to speak (3 min. limit)	☐ Wish to speak (3 min. l	imit) 🔲 Wisi	h to speak (	(3 min. limit)
☐ Do not wish to speak	☐ Do not wish to speak	□ Do 1	not wish to	speak
💢 Available to answer questions	☐ Available to answer qu	estions 🗆 Ava	ilable to an	swer questions
At this meeting are you representing an organization or a person other than yourself: \(\simeg \) Yes \(\simeg \) 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 ea	ach person or organization you	are representing:		
Are you being paid for your representation?			☐ Yes	<b>X</b> No
Are you appearing as part of your other paid of (If you answered "no" to both these question. If you answered "yes," please continue.)	duties for this person or organizars, STOP. You need not complete	tion? the rest of this form.	☐ Yes	<b>Д</b> Ио
Are you an elected official or employee who for your municipality or other governmental to (If you answered "yes" to the question, STOI that you must sign this form. If you answered	body? <b>P.</b> You need not complete the rest	of this form except	☐ Yes	No
If you are being paid for your representation, or if your appearance is part of other paid duties, please be advised that:				
1. Before you engage in lobbying as a lobbyist, you or your principal must file an authorization with the City Clerk.				
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(Please go to the City Clerk's website <u>www.ci</u> County Building, Madison, for more informat	ityofmadison.com/clerk/index.htm tion.)	n <u>l</u> or go to the Clerk's (	Office at Room	n 103 of the City-
Date 10.15.12	Signature DC D	ST K	$\mathcal{X}_{-}$	

## 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.
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- 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. 16 SU	BJECT/ADDRESS/TOPIC	Jemo Perr	it 3	12 N. Harito
YOUR NAME Henry God	se\	DATE _201	2-10.	15
YOUR ADDRESS W9874	Blue Jay Wa	y (ambri	dge L	125753
Please check the appropriate boxes:	5	J1 -	J	
Support	☐ Oppose	☐ Neither	Support	Nor Oppose
☐ Wish to speak (3 min. limit)	☐ Wish to speak (3 min. lin	uit) 🔲 Wis	sh 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 ques	stions 🔲 Ava	ilable to ar	swer questions
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Name, address and telephone number of ea	ach person or organization you a	re representing:		
	•			
Are you being paid for your representation?			☐ Yes	<b>⋈</b> N₀
Are you appearing as part of your other paid of (If you answered "no" to both these question. If you answered "yes," please continue.)			☐ Yes	No
Are you an elected official or employee who for your municipality or other governmental to (If you answered "yes" to the question, STOI that you must sign this form. If you answered	oody? P. You need not complete the rest o	f this form except	☐ Yes	No
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2. Your principal is not permitted to authori			-	
If your principal spends or will owe more principal must file expense statements with the statement of	e than \$1,000 for lobbying services th the City Clerk for the remaining	in any reporting per quarters of the cale	riod (calendar ndar year.	six months), the
(Please go to the City Clerk's website www.cityofmadison.com/clerk/index.ltml or go to the Clerk's Office at Room 103 of the City-County Building, Madison, for more information.)  Date 2012-10-15  Signature				

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AGENDA ITEM NO. 16 SUBJECT/ADDRESS/TOPIC 312 N. Hamlita				
YOUR NAME Lype Montes DATE 10/15/12				
YOUR ADDRESS 108 N. Havicock				
Please check the appropriate boxes:				
Support				
☐ Wish to speak (3 min. limit) ☐ Wish to speak (3 min. limit) ☐ Wish to speak (3 min. limit)				
Do not wish to speak				
☐ Available to answer questions ☐ Available to answer questions ☐ Available to answer questions				
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ACENDA ITEM NO 1/2 GLIDIECT/ADDREGG/TODIC 3/2 1/1 1/1 SI					
YOUR NAME ALDER BY DO A MONIOCA DATE OCTOBER 15-7010					
YOUR ADDRESS 9/6 E	Josham Street	APT F			
Please check the appropriate boxes:					
Support	1 Oppose	☐ Neither Support Nor Oppose			
Wish to speak (3 min. limit)	☐ Wish to speak (3 min. limit)	☐ Wish to speak (3 min. limit)			
<sup>¹</sup> □ 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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