



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 Madison Municipal Building, suite 109  
Madison, WI 53703

\_\_\_\_\_, being first duly sworn, state that:  
(Property Manager Name- Please Print)

1) I am the owner ( ) and/or rental agent ( ) of the following described dwelling unit

\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
(Street Address) (Apt. #) (City)  
\_\_\_\_\_; and  
(Telephone Number)

2) This dwelling unit is presently occupied ( ) /rented ( ) to:

\_\_\_\_\_  
(Name of Renter)

\_\_\_\_\_/\_\_\_\_\_  
(Property Manager Signature) (Date)

To be completed by Notary

**Notary Information:**

Subscribed and Sworn to before me

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

\_\_\_\_\_  
Notary Public, Dane County, Wisconsin

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