



Condominium Review Coversheet

NOTE TO APPLICANTS: * Checks should be made payable to Dane County Treasurer
 * This coversheet must be included with any condominium instrument proposed for review by Dane County. The ten day review period will begin when the following materials have been submitted:

- Condominium Instrument (as defined in chapter 703, Wis. Stats.)
 Completed Coversheet
 Applicable Fees (\$165 + \$25/unit) \$1000 maximum

Condominium & Location Information			
Name of Proposed Condominium	Municipality		
Address	Parcel Number(s)		
Applicant Information			
Name of Applicant	Phone Number	Fax Number	
Address	City	State	Zip Code
Ownership Information (if different than Applicant)			
Name of Owner	Phone Number	Fax Number	
Address	City	State	Zip Code
Contact Information (if different than Applicant)			
Name of Contact	Phone Number	Fax Number	
E-Mail Address			
Additional Condominium Information			
Number of Units (as defined in 75.54, Dane County Ordinance)	Is this condominium expandable? <input type="checkbox"/> Yes <input type="checkbox"/> No	Are there any conveyable limited common elements?	
Purpose (if amended or an addendum)	Would you like separate tax bills set up for the individual units for the current tax year? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Please list any proposed private road names			
For Office Use Only			
File Number	Fees Received \$1000 maximum \$	DATE STAMP	
Staff Initials - Date			