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(	<ul> <li>(12). Children under the age of 12 shall not count towards the maximum number of guests.</li> <li>Do not count children under age 12 in "Number of Guests" column.</li> </ul>	☐ If an Excel document would be preferable, go to <a href="mailto:cityofmadison.com/trhreporting/">cityofmadison.com/trhreporting/</a> . Download the Quarterly Reporting template ZTRHP-QR (Excel file), complete, and submit with your initial application along with this page.					
	☐ Maximum # of guests X 2 =  Calculate number of legal bedrooms x 2 =  Maximum number of guests is the lesser of two times the number of legal bedrooms or twelve	☐ If you have☐ Listing Nun☐ Room num☐	never had rentals at your TRH, write "NO mbers must match those used on Form ZTI bers must match your approved floor plants.	RENTALS" or RHP1-D Adve	rtising Locati	ons.	t.
	Madison, WI 53701-2984  phone: (608) 266-4551  web: cityofmadison.com/trh  email: zoningTRH@cityofmadison.com	☐ List all rese	for Quarterly Reporting ervations in chronological order, using a se n party's stay. Add additional sheets as nee		or each night	of each	
	City of Madison Building Inspection Division: Zoning Dept. Madison Municipal Building, Suite 017 215 Martin Luther King, Jr. Blvd. P.O. Box 2984	Full names of all	Cohosts DBA nam				
	ZTRHP1		House Address:			Unit	
	FOR OFFICE USE ONLY:	REGISTRY: New	/ Applicant				

ROOM(S)	ARRIVAL DATE	NUMBER OF NIGHTS	GUEST NAME	GUEST CONTACT	NUMBER OF GUESTS	LISTING NUMBER	HOST ONSITE	HOST OFFSITE

FOR OFFICE USE ONLY:	REGISTRY: New Applicant (CONTINUED)	
ZTRHP1	Tourist Rooming House Address:	Unit #:

ROOM(S)	ARRIVAL DATE	NUMBER OF NIGHTS	GUEST NAME	GUEST CONTACT	NUMBER OF GUESTS	LISTING NUMBER	HOST ONSITE	HOST OFFSITE