

Town of Three Lakes
Tourist Rooming House Application - \$150.00 fee due with application unless it is a change in agent

Name of Applicant: _____

Trade Name: _____

Address of Premises: _____

Mailing Address: _____

Phone Number: _____

Email Address: _____

Number of Units Available for Rent: _____

Wisconsin Sales Tax Seller's Permit Number: _____

Oneida County Health Department Permit Number:

(Please include a copy of your seller's permit and Oneida County Health Department permit)

Signature of Owner/Authorized Agent

Change of Agent fee is \$25.00 per property.

Fee for Advertising or Renting without the permit is an additional \$500.00