



## Short Term Rental – Tourist Rooming House Permit Application

Pursuant to Municipal Code Chapter 26

**COMPLETE BOTH SIDES OF APPLICATION**

LICENSING PERIOD JULY 1, 20_____ to JUNE 30, 20_____	APPLICATION DATE
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PROPERTY INFORMATION	
ADDRESS	ESTABLISHMENT NAME
NUMBER OF ROOMS/UNITS AVAILABLE FOR RENT	ESTIMATED SQUARE FOOTAGE OF SPACE FOR RENT
ZONING INFORMATION	

OWNER INFORMATION	
NAME	NAME OF BUSINESS, LLC, OR CORPORATION, IF APPLICABLE
STREET ADDRESS	CITY, STATE, ZIP CODE
PHONE NUMBER	EMAIL ADDRESS

RESPONSIBLE AGENT/MANAGEMENT COMPANY (In Owner's Absence)	
NAME	MANAGEMENT COMPANY NAME, IF APPLICABLE
PHONE NUMBER - Must be accessible 24 hours a day	EMAIL ADDRESS

STATE OF WISCONSIN DEPARTMENT OF REVENUE SELLER'S PERMIT	
NAME ON PERMIT	PERMIT NUMBER
STREET ADDRESS	CITY, STATE, ZIP CODE

**Submit a copy of your State of Wisconsin Department of Revenue Seller's Permit with application.**

FOR DEPARTMENT USE ONLY		
DATE PAID	RECEIPT #	PAYMENT METHOD
PRE-INSPECTION FEE	LICENSE FEE	TOTAL PAID
RECEIVED DRIVER'S LICENSE	RECEIVED WI SELLER'S PERMIT	

<p>All establishments shall be required to have appropriate permit(s)/license(s) as described by Village Ordinance. All establishments shall comply with the requirements of the Wisconsin Administrative Code.</p>
<p>The fees for the appropriate permit(s)/license(s) are due and payable before the first issuance of such permit(s)/license(s), and ANNUALLY BEFORE JUNE 30 EACH YEAR. Permit(s)/license(s) are not transferrable between persons or locations. The license fee is not prorated for partial license years. All fees are non-refundable.</p> <p><b>* OPERATING WITHOUT A PERMIT/LICENSE WILL RESULT IN A PENALTY ACCORDING TO MUNICIPAL AND STATE CODES. *</b></p>
<p>All establishments will need an inspection before a new permit/license is granted.</p>
<p>ALL APPLICATIONS ARE SUBJECT TO APPROVAL. <b>NO TOURIST ROOMING HOUSE MAY BE OCCUPIED UNTIL A PERMIT IS ISSUED.</b> Upon approval, the permit can only be utilized for 180 days.</p>

**SIGNING BELOW INDICATES YOU AGREE TO THE ABOVE TERMS.**

\_\_\_\_\_  
PROPERTY OWNER SIGNATURE

\_\_\_\_\_  
PRINT NAME

\_\_\_\_\_  
TITLE

\_\_\_\_\_  
DATE

Annual Permit Fee	\$300

Please attach the following:

- ✓ The **WI Seller's Permit** must be provided when this application is submitted.
- ✓ Current floor plan for the Tourist Rooming House at a minimum scale of one inch equals 4 feet.
- ✓ **Site Plan** of the property at a minimum scale of one inch equals 10 feet showing on-site parking spaces and trash storage.
- ✓ List of all property that may be used by the tenant.
- ✓ Proof of valid property and liability insurance with occurrence coverage of at least \$1 million.
- ✓ Comprehensive General Liability of \$2 million in the aggregate for the Tourist Home.
- ✓ **State of WI Tourist Rental House License.**
- ✓ Proof of compliance with **ATCP 72.14.**
- ✓ Permit Issued by **North Shore Health Department.**