## **Town of Westport**

5387 Mary Lake Road Waunakee, WI 53597

| License Expires | Each Year |  |
|-----------------|-----------|--|
| (Annually) or   | n June 30 |  |
| Туре            | Fee       |  |
| New             | \$1000    |  |
| Renewal         | \$ 500    |  |

|   | Short-  | Term Rental Application   |
|---|---|---|
|   | npleted application must be submitt   | ed with all other required documents & fees (paid in full) in order to be accepted  |
| Short-Term R  | ental (STR) Site Informat   | tion  |
| Address   |   | Parcel ID #   |
| Maximum O   | ccupancy  | State Lodging License #*  |
| FEIN #  |   | WI Seller's Permit #*   |
| *copies of pe   | rmits/licenses must be incli  | Parcel ID #  State Lodging License #*  WI Seller's Permit #*  uded with application |
| Owner Inform  | nation  |   |
| Name  |   | Address   |
| Phone   | Da  | te of Birth Email   |
| Owner   | r is also Property Manager  | ☐ YES ☐ NO (If no, complete Property Manager information below)                     |
|   | s Names This Property M   |   |
| Name(s)   |   |   |
|   | T 0 1 70 16   |   |
| Property Man  | ager Information (if not (  | Owner)  |
| Name  |   | of Birth Email  |
| Phone   | Date  | of Birth Email  |
| ☐ Copy of con ☐ Proof of ins ☐ Copy of Sel ☐ Floor plan a ☐ Site plan inc ☐ Designation ☐ Copy of con ☐ Employer ic I state that I have not be requirements Code. I hereby addictivil action arising applicant must disproperty's prior over the second of th | mpleted State Lodging Establishmance ller's Permit from the Departrand requested maximum occur cluding available on-site park a of the Property Manager AN impleted inspections dentification number issued by read the foregoing answers and the ly with all provisions of Town of a and I will comply with those re- ditionally designate the Property cout of/or in conjunction with the close on his or her application for wher. Any applicant failing to di | pancy   |
| Owners Signati  | ıre   | Date  |
| Remit applicatio  | n, fees and all other required  |   |
|   | EOD OFFICE HEE ONLY   |   |
|   | FOR OFFICE USE ONLY   | Fee Paid: □ yes / □ no License #:   |
|   | 1   |   |
|   | Outstanding Debt: ☐ yes / ☐ no  | Fire Inspection: □ yes / □ no Building Inspection: □ yes / □ no                     |
|   | Licensed Approved: ☐ yes / ☐ no   | Clerk-Treasurer Signature: Date   |

## **Town of Westport**

5387 Mary Lake Road Waunakee, WI 53597 License Expires Each Year (Annually) on June 30 \$250 per additional unit Primary (1") STR. License #:

Short-Term Rental: Additional Unit Application This completed application must be submitted with all other required documents & fees (paid in full) in order to be accepted Short-Term Rental (STR) Site Information Address \_\_\_\_\_ Parcel ID # \_\_\_\_\_ Maximum Occupancy \_\_\_\_\_ State Lodging License #\* \_\_\_\_\_ FEIN # \_\_\_\_\_ WI Seller's Permit #\* \_\_\_\_ \*copies of permits/licenses must be included with application Owner Information Owner is also Property Manager 

YES NO (If no, complete Property Manager information below) Other Business Names This Property May Be Listed Under Property Manager Information (if not Owner) Name \_\_\_\_\_ Address \_\_\_\_ Email \_\_\_\_\_ Items to Submit with Application (REQUIRED AT TIME OF SUBMITTAL) ☐ Copy of State of Wisconsin License for a Tourist Rooming House License issued under Wis. Stat. Sec. 254.64 ☐ Copy of completed State Lodging Establishment Inspection form dated within one year of the date of issuance or renewal ☐ Proof of insurance ☐ Copy of Seller's Permit from the Department of Revenue, if any ☐ Floor plan and requested maximum occupancy ☐ Site plan including available on-site parking ☐ Designation of the Property Manager AND Property Management Agreement (if applicable) ☐ Copy of completed inspections ☐ Employer identification number issued by the Internal Revenue Service I state that I have read the foregoing answers and the same are true to the best of my knowledge. I understand that any short-term rental license shall comply with all provisions of Town of Westport Code Title 7, Chapter 11, and I hereby certify that the property meets those requirements and I will comply with those requirements, and also comply with the Town Lodging Tax Code, Chapter 7-12, Town Code. I hereby additionally designate the Property Manager, if any, as an agent for the purposes of accepting service of process in any civil action arising out of/or in conjunction with the use of this license. Town of Westport Code Section 7-11-5(g) requires that every applicant must disclose on his or her application for any license any and all amounts of money owed to the Town by the applicant or the property's prior owner. Any applicant failing to disclose such debts will not be issued a license until all debts are paid in full. I hereby further certify that I do not have any outstanding debts owing the Town of Westport. Owners Signature \_\_\_\_\_ Date \_\_\_\_\_ Remit application, fees and all other required documents to: Clerk-Treasurer, Town of Westport, 5387 Mary Lake Road, Waunakee, WI 53597 FOR OFFICE USE ONLY 

## **Town of Westport**

5387 Mary Lake Road Waunakee, WI 53597

| (Annually) on | June 30 |
|---------------|---------|
| Туре          | Fee     |
| New           | \$100   |
| Renewal       | \$100   |

Short-Term Rental: Property Manager Application

Property Manager must be on call 24/7 and reside within 25 miles of the Town of Westport

This completed application must be submitted along with all fees (paid in full) **Applicant Information** Name \_\_\_\_\_ Address \_\_\_\_ Email \_\_\_\_\_ **Applicant Criminal History** HAVE YOU EVER been convicted of a felony or misdemeanor of any offense involving dishonesty, fraud, deceit, robbery, the use or threatened use or violence upon the person of another? ☐ Yes / ☐ No If yes, please list all convictions below. If more space is needed, please use back of this application. Offense / Conviction Do you have any PENDING charges? ☐ Yes / ☐ No If YES, please list pending charges below. If more space needed, please use back of this application. Offense / Arrest Properties Managed (If more space is needed, please include additional properties on separate page) 1. Address \_\_\_\_\_\_ Owner Name \_\_\_\_\_ 4. Address \_\_\_\_\_\_ Owner Name \_\_\_\_\_ I state that I have read the foregoing answers and the same are true to the best of my knowledge. I understand that any short-term rental license shall comply with all provisions of Town of Westport Code Title 7, Chapter 11, and I hereby certify that the properties meet those requirements. I further acknowledge that I may be the agent for the purposes of accepting service of process in any violation of the Town of Westport Code arising out of/or in conjunction with the use of the short-term rental licenses. Applicant Signature \_\_\_\_\_ Date \_\_\_\_ Remit application, fees and all other required documents to: Clerk-Treasurer, Town of Westport, 5387 Mary Lake Road, Waunakee, WI 53597 FOR OFFICE USE ONLY Date Received: \$100 Fee Paid: ☐ yes / ☐ no License #: \_\_\_\_\_ Criminal History Checked: ☐ yes / ☐ no Employee Initial \_\_\_\_\_ Chief of Public Safety Check: ☐ yes / ☐ no Licensed Approved: ☐ yes / ☐ no Clerk-Treasurer Signature: \_\_\_\_\_\_ Date \_\_\_\_\_\_ Explanation, if denied: