



Town of Lakewood
17181 Twin Pines Road
Lakewood WI 54138
715-276-3579

Short Term Rental Application/Renewal

Fee: \$50.00-Application/\$25.00 Renewal

PROPERTY OWNER INFORMATION

FULL NAME: _____

Last

First

MAILING

ADDRESS: _____

PHONE NUMBER: _____

EMAIL: _____

PROPERTY INFORMATION

SHORT TERM RENTAL

ADDRESS: _____

Maximum Occupancy for STR _____

**Occupancy is determined by capacity of private septic system or ATCP
72 for public sanitary**

Do you use a marketplace provider? Yes _____ No _____ Provider

Name: _____

Number of units? _____

PROPERTY MANAGER CONTACT INFORMATION (if different than owner)

FULL

NAME _____

ADDRESS: _____

CELL

PHONE: _____ EMAIL: _____

STATE LICENSING & INSURANCE INFORMATION

WI DOR Seller's Permit # _____ DATCP Tourist Rooming House Permit

#: _____

Property Insurance Company: _____ Policy

Number: _____

OFFICE USE ONLY

DATE PAID_____AMOUNT PAID_____RECPT
#_____

Permit Number_____Date
Issued:_____

Signature:_____Clerk's
