

Town of Lyndon
Initial Tourist Rooming House/Short-Term Rental License Application

(a) Applicant Name _____

Mailing Address _____

Email Address _____

Phone Number of each and every owner of the proposed Rooming
House _____

Sales Tax Number _____

If the applicant is not a natural person (i.e. if the applicant is a corporation, LLC, or other entity) the identity and contact information of the officers, directors, members, managers and agents shall also be provided. _____

(b) If applicable, the name, mailing address, e-mail address, and phone number of the Resident Agent, along with a copy of the written document by which the Resident Agent was appointed by the Owner

(c) If applicable, the name, mailing address, e-mail address, and phone number of the Property Manager, along with a copy of the written document by which the Property Manager was appointed by the Owner

(d) Name and mailing address of all other property owners within 500 feet of the lot upon which the Rooming House is located _____

(e) A copy of the Tourist Rooming House License issued by the State, if required (i.e., if the Rooming House will be operated for more than 10 days per year).

(f) A copy of a completed Lodging Establishment Health Inspection form dated within one (1) year of the date of first application or request for renewal.

(g) A certificate of insurance confirming that the Owner has the insurance required herein.

(h) An interior floor plan of the Rooming House, drawn to scale, showing the following:

1. The layout of each floor of the Rooming House;
2. Calculation of the living space in the Rooming House;
3. The location of each Bedroom in the Rooming House, the dimensions of each Bedroom with the size and location of beds on the floor plan, the sleeping capacity of each Bedroom, and the location of each means of exit from each Bedroom.
4. If applicable, the location of each fireplace and a copy of the posted instructions for safe operation of the fireplace.
5. If applicable, the location of each grill and copy of the instructions for safe operation of the grill.

(i) An exterior site plan, drawn to scale, showing the following:

1. The Rooming House;
2. All other structures on the lot upon which the Rooming House is located;
3. The location of the driveway;
4. The location of the public road;
5. The location of all parking, along with an explanation of how the parking meets the requirements of this Subchapter.

(j) Property Owner/License Holder Signature _____

Your signature above will indicate that all the above information is true and correct to your knowledge and that by applying for this License, that I am bound to all Municipal Codes including Chapter 15, Subchapter 5 and any other codes or regulations that may apply. I also grant that an inspection of this property be conducted by the Town Housing Inspector prior to approval of this license.

(k) Initial Application Fee is **\$500** to be included and sent to:

Town of Lyndon Clerk
W3080 Mitchell Rd
Lyndon Station WI 53944