



Iron County Health Department

Environmental Health

210 Fifth Avenue North, Hurley, WI 54534

Office: 715-561-2191 Cell: 715-208-2041 lotzerd@ironcountywi.org

License Application – Lodging Establishment

Wis. Stat. § 97.30

ESTABLISHMENT/DBA INFORMATION:			
ESTABLISHMENT/DBA NAME:		COUNTY:	
ESTABLISHMENT STREET ADDRESS:	CITY:	STATE:	ZIP:
EMAIL ADDRESS:		ESTABLISHMENT PHONE NUMBER: () -	
Choose One: <input type="checkbox"/> Plan Review Required – New Construction or Remodel; <input type="checkbox"/> No Plan Review – Existing Facility			

LEGAL ENTITY INFORMATION – CHECK ONE			
<input type="checkbox"/> Individual	<input type="checkbox"/> Married Couple	<input type="checkbox"/> Limited Liability Company (LLC)	<input type="checkbox"/> Limited Liability Partnership (LLP)
<input type="checkbox"/> Cooperative	<input type="checkbox"/> Partnership	<input type="checkbox"/> Limited Partnership (LP)	In what state is your entity registered?
LEGAL ENTITY (such as name of sole proprietor, partnership, LLC, LLP, or Inc.):		COUNTY:	
LEGAL ENTITY MAILING ADDRESS:	CITY:	STATE:	ZIP:
EMAIL ADDRESS:		LEGAL ENTITY PHONE NUMBER: () -	

CONTACT INFORMATION			
CONTACT PERSON:	TITLE:	PHONE NUMBER: () -	EMAIL ADDRESS:

LICENSE FEES – Select one based on the permit category worksheet	
<input type="checkbox"/> Bed & Breakfast (8 rooms or less)	License \$430 (\$130 Permit Fee + \$300 Preinspection Fee)
<input type="checkbox"/> Tourist Rooming House (1-4 Cabin/Cottage etc)	License \$430.00 (\$130 Permit Fee + \$300 Preinspection Fee)
<input type="checkbox"/> Hotel/Motel/Resort (5-30 Rooms)	License Fee \$705.00 (\$225 Permit Fee + \$480 Preinspection Fee)
<input type="checkbox"/> Hotel/Motel/Resort (33-99 Rooms)	License Fee \$945.00 (\$355 Permit Fee + \$665 Preinspection Fee)
<input type="checkbox"/> Hotel/Motel/Resort (100-199 Rooms)	License Fee \$1150.00 (\$490 Permit Fee + \$795 Preinspection Fee)
<input type="checkbox"/> Hotel/Motel/Resort (200+ rooms)	License Fee \$1675.00 (\$490 Permit Fee + 1185 Preinspection Fee)
Total Amount Enclosed: \$	Check Number

PLEASE READ CAREFULLY BEFORE SIGNING	
<p>Information requested on this application must be provided to obtain a retail food establishment license. Personal information you provide may be used for purposes other than that for which it was originally collected (Wis. Stat. § 15.04(1)(m).) Operating without a license is a violation of Wisconsin Law. If you have been operating without a license, you will be required to pay a surcharge in addition to the license fee. Licenses are not transferable between persons or locations. Licenses expire annually on June 30th; unless issued after April 1st, which will expire on June 30th of the following year. The license fee is not prorated for partial license years. The Department may inspect premises at any reasonable time. Missing information may delay the issuance of your license. You are not licensed to operate until the department conducts an inspection. The undersigned hereby certifies that this is a true, complete and accurate application for the Lodging Establishment license under Wis. Stat. § 97.30.</p>	
SIGNATURE – APPLICANT:	DATE SIGNED:

Please mail application and payment to: Iron County Health Department, 210 Fifth Avenue North, Hurley, WI 54534