



N4454 Horner Road

Ripon, WI 54971

(920) 463-0938

Email: townofgreenlakeclerk@gmail.com

ROOM TAX PERMIT APPLICATION

**** FOR THE YEAR: 20_____ ** ANNUAL FEE: \$300.00 ****

APPLICANT/AGENT

PROPERTY OWNER

NAME	NAME
ADDRESS	ADDRESS
CITY STATE ZIP CODE	CITY STATE ZIP CODE
PHONE NUMBER () - ALT NUMBER () -	PHONE NUMBER () - ALT NUMBER () -
EMAIL	EMAIL

Name of Lodging Facility, Number of Rooms and Physical Address. Attach an additional sheet if necessary.

Lodging Facility	# of Rooms
Physical Address	

Please circle if you are a: Sole Proprietorship Partnership Corporation LLC Other

WI Seller Permit Number _____ If Other explain: _____

Will you be using a Third-Party Booking Administrator? Yes _____ No _____

If yes explain: ie Airbnb, VRBO, Evolve, hometogo, etc. _____

Is the business open year around? Yes _____ No _____ If Seasonal indicate which quarters you are open

____ 1st quarter (Jan, Feb, Mar) ____ 2nd quarter (Apr, May, June) ____ 3rd quarter (July, Aug, Sept)

____ 4th quarter (Oct, Nov, Dec)

I hereby certify that the answers to the above questions are correct to the best of my knowledge and belief.

Signature of Owner or Authorized Agent: _____

Print Name and Title: _____ Date: _____