

TOWN OF PELICAN
PO Box 1460
Rhineland, WI 54501
715-365-3500

TRANSIENT LODGING PERMIT APPLICATION

Permit Number: _____

Name of Applicant: _____

Trade Name: _____

Address of Premises: _____

Number of Units Available for Rent: _____

Present Rate Schedule: Please Attach Schedule

WI Seller's Permit Number: _____

Dates Business Is Open: _____

Signature of Owner

Date: _____

Send Quarterly Report Forms To: Treasurer, Town of Pelican
P.O. Box 1460
Rhineland, WI 54501

Date Permit Issued: _____