

**TOWN OF MINONG  
SHORT-TERM RENTAL PROPERTY  
APPLICATION RENEWAL FORM**

PROPERTY OWNER: \_\_\_\_\_

PROPERTY ADDRESS: \_\_\_\_\_

PROPERTY OWNER PHONE #: \_\_\_\_\_

PROPERTY OWNER MAILING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

AREAS OF PROPERTY TO BE RENTED: \_\_\_\_\_

PROPERTY MANAGER: \_\_\_\_\_

PROPERTY MANAGER PHONE #: \_\_\_\_\_

PROPERTY MANAGER PHYSICAL ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_, WI

PROPERTY OWNER WILL PROVIDE PROPERTY MANAGERS CONTACT INFORMATION TO TENENTS: YES or NO

IS THE PROPERTY INSURED? YES or NO

- Please provide proof of insurance for current year.

STATE LICENSE FOR PUBLIC LODGING IS CURRENT? YES or NO

- Please provide copy of current state license.

SIGNATURE OF OWNER: \_\_\_\_\_ DATE: \_\_\_\_\_

\*\*\*\*\*TO BE FILLED OUT BY OFFICE\*\*\*\*\*

TAXES ARE CURRENT (as of January 1<sup>st</sup> installment): YES or NO

COPY OF ADEQUATE RENTAL INSUANCE WAS PROVIDED: YES or NO

OWNER PROVIDED STATE OF WI LICENSE FOR PUBLIC LODGING: YES or NO

LICENSE APPLICATION FEE WAS RECEIVED: YES or NO

TOWN BOARD APPROVED APPLICATION: YES or NO                      DATE: \_\_\_\_\_