Chippewa County Department of Public Health

711 N Bridge Street, Room 121, Chippewa Falls, WI 54729
P: 715.726.7900 / 1.800.400.3678 / F: 715.726.7910
health@chippewacountywi.us

LICENSE APPLICATION – LODGING

Completion of this form is voluntary, however, to receive a permit you must complete the form. To receive a permit, send the completed application and fee(s), check or money order, payable to the Chippewa County Department of Public Health 30 days before advertising or renting. Incomplete information may delay processing your application.   Type or Print Only

Application is for: ☐ New Establishment   ☐ Change in Ownership   ☐ Other, please specify _____

ESTABLISHMENT/DBA INFORMATION:

ESTABLISHMENT/DBA NAME:		COUNTY:	
ESTABLISHMENT STREET ADDRESS:	CITY:	STATE:	ZIP:
EMAIL ADDRESS:		ESTABLISHMENT PHONE NUMBER: ( ) -	
PREVIOUS BUSINESS NAME:			

LEGAL ENTITY INFORMATION – *CHECK ONE*

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:

LODGING: *Number of induvial, keyed units*

☐ Tourist Rooming House (1-4 rooms) _____
☐ Hotel / Motel / Resort (5-30 rooms) _____
☐ Hotel / Motel / Resort (31-99 rooms) _____
☐ Hotel / Motel / Resort (100-199 rooms) _____
☐ Hotel / Motel / Resort (200+ rooms) _____
☐ Bed & Breakfast (8 or less rooms) _____

Do you have food service for tourists, transients or guests on your premises?   ☐ Yes   ☐ No

Hotel/Motel operator, please advise us as to which you want to be classified as:
☐ Hotel   ☐ Motel

Septic/ Holding Tank: What is the number of people your septic tank is rated for? _____
 (Receive this number from the Chippewa County Department of Planning & Zoning, 715-726-7940)

Drinking Water Source: Private Well ☐   **Municipal System** ☐   **Municipality:** _____

***Water can be collected by Chippewa County Public Health. $25 for bacteria, $30 for nitrates**
***If the business serves more than 25 people, at least 60 days a year, it needs to be part of the DNR public water program.**

FEE AMOUNTS – FEES AVAILABLE ON SEPARATE DOCUMENT

SIGNATURE – APPLICANT:	DATE SIGNED:	AMOUNT ENCLOSED: $	Check #:

Please mail application and payment to:
Chippewa County Department of Public Health, 711 N Bridge Street, Rm 121, Chippewa Falls, WI 54729

* A permit shall not be issued to an operator without prior inspection.

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No person may conduct, maintain, manage, or operate a hotel, tourist rooming house, vending machine commissary or vending machine (Chapter 97.605(1)(a)); No restaurant or temporary restaurant may be opened to the public (ATCP 75.104(1)); No operating a campground (ATCP 79.05(1)(a); Recreational camp and educational camp (ATCP 78.05(1)); tattoo establishments (SPS 221.04(1); or public swimming pool (ATCP 76.05 (1)) until the operator has obtained a permit and all applicable fees have been paid.

Chapter 97.30(2)(b), ATCP 79.05(2)(a), 78.05(2), 76.05(2), SPS 221.04(2)(a) Permits initially released April 1 and after will expire June 30 of the following year

Within **30 days** after receiving a complete application for a permit, the department or its agent shall either approve the application and issue a permit or deny the application. If the application for a permit is denied, the department or its agent shall give the applicant reasons, in writing, for the denial.

* A permit shall not be issued to an operator without prior inspection.