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| Walworth County Land Use and Resource Management Department 100 West Walworth - Room 222 Elkhorn, WI 53121 262-741-4972 fax: 262-741-4973 Website: www.co.walworth.wi.us | WALWORTH COUNTY SHORT TERM RENTAL ANNUAL LICENSE RENEWAL APPLICATION | License No. Tax Key Parcel No. |
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Please Verify the following is correct:

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| Landowner- Name | Landowner- Tel. # & Email |
| Landowner- Mailing Address | |
| Designated Operator- Name | Designated Operator- Tel# (24 hrs) |
| Designated Operator- Email Address | |
| Address of Property to be Rented | Garbage Hauler and Weekly Schedule |

OCCUPANCY

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| | <p>NOTE: OCCUPANCY LIMIT IS BASED ON SANITARY FACILITIES Occupancy is limited to the number of occupants the POWTS is sized for or the State License whichever is less. If served by public sewer, the State License determines occupancy.</p> |
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I certify that I am the owner or the authorized representative of the owner of the property that is the subject of this License Application. I certify that the information contained in this form and the attachments is true, accurate and complete. I agree to comply with all applicable codes, statutes and ordinances and with the conditions of the County-approved license. I understand that the issuance of this license creates no legal liability expressed or implied on Walworth County. Proof of the License and Property Rules shall be posted in a conspicuous location at all times while the property is rented and made available upon request for inspection. I have received a copy of the County’s Short Term Rental licensing rules and I understand that failure to comply with any or all of the provisions of the license may result in license revocation, fines, forfeitures and additional compliance inspection fees. I understand, no person shall operate a Short Term Rental regulated by Chapter 26 of the Walworth County Code of Ordinances, without first obtaining a license.

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| Applicant’s Signature: | Date Signed: |
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For Office Use Only

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| License Approved by: | Date: |
| Expiration Date: June 30, 2022 | |