

Department of Public HealthDottie-Kay Bowersox, MSA
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Environmental Health Division
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Community Health Division
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262-636-9571

APPLICATION FOR SHORT TERM RENTAL AND TOURIST ROOMING HOUSE PERMIT

Pursuant to Municipal Code Chapter 22

PRINT CLEARLY AND ANSWER ALL QUESTIONS

Return Application with Payment to the City of Racine Department of Customer Service
730 Washington Ave, Room 103, Racine, WI 53403 – Make Checks Payable to "CITY OF RACINE"

OWNER INFORMATION	PROPERTY INFORMATION
NAME OF BUSINESS, LLC, OR CORPORATION, IF APPLICABLE	ESTABLISHMENT NAME, IF DIFFERENT
OWNER NAME	ESTIMATED SQUARE FOOTAGE OF SPACE FOR RENT
STREET ADDRESS	IS THIS YOUR PRIMARY RESIDENCE? <input type="checkbox"/> YES <input type="checkbox"/> NO
CITY, STATE, ZIP CODE	NUMBER OF BEDROOMS IN THE RESIDENCE
PHONE NUMBER	ZONING INFORMATION
EMAIL ADDRESS	

RESPONSIBLE AGENT / MANAGEMENT COMPANY (In Owner's Absence)	
NAME	MANAGEMENT COMPANY NAME, IF APPLICABLE
PHONE NUMBER	EMAIL ADDRESS

STATE OF WISCONSIN DEPARTMENT OF REVENUE SELLER'S PERMIT	
NAME ON PERMIT	PERMIT NUMBER
STREET ADDRESS	CITY, STATE, ZIP CODE

SUBMIT A COPY OF YOUR STATE OF WISCONSIN DEPARTMENT OF REVENUE SELLER'S PERMIT *WITH APPLICATION. **If Required*

SUBMIT PROOF OF RESIDENCY (UTILITY BILL) WITH APPLICATION.

(See back for Fee Schedule)

SHORT TERM RENTAL AND TOURIST ROOMING HOUSE FEES	
Application and One Time Inspection Fee Includes Building Inspection and Public Health Inspection (INSPHL)	\$340
Fire Department Inspection	\$50
Annual Permit Fee State Mandated (INSPHL)	\$210
Room Tax Permit Fee	\$3
TOTAL DUE	\$603
WI Seller's Permit Fee is paid to the WI Department of Revenue: \$20	