

Town of Spider Lake  
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[www.townofspiderlake@centurytel.net](http://www.townofspiderlake@centurytel.net)  
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Town of Spider Lake  
**Short-Term Rental Agreement**  
Licensing Period: January 1<sup>st</sup> through December 31<sup>st</sup>

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Fee: **\$500 – Initial & Renewal Short Term Rental Application**      **\$250 – Each Additional Unit Added**  
**\$125 – Late Filing Fee**      **\$100 – Re-inspection**

**APPLICANT INFORMATION**

Applicant Identity:      OWNER

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
(Last, First, Middle)

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ Email \_\_\_\_\_

Maximum Occupancy for Premise \_\_\_\_\_ State Lodging License Number\* \_\_\_\_\_

Seller's Permit Number\* \_\_\_\_\_ FEIN Number \_\_\_\_\_

Room Tax Number\* \_\_\_\_\_ \*copies of all permits need to be included with application

**OWNER INFORMATION**      SAME AS APPLICANT

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
(Last, First, Middle)

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ Email \_\_\_\_\_

**PROPERTY MANAGER**      SAME AS APPLICANT

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
(Last, First, Middle)

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ Email \_\_\_\_\_

**LOCAL 24/7 CONTACT PERSON**      SAME AS APPLICANT

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
(Last, First, Middle)

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_ Email \_\_\_\_\_

*continued on next page*

**PLEASE INCLUDE THE FOLLOWING REQUIRED ITEMS WITH THIS APPLICATION  
(APPLICATION CANNOT BE SUBMITTED WITHOUT ALL ITEMS INCLUDED)**

1. A copy of the State of Wisconsin License for a Tourist Rooming House issued under Wis.Stat.Sec 254.64;
2. A copy of a completed State Lodging Establishment Inspection form dated within one (1) year of the date of issuance or renewal. If State Lodging Establishment Inspection is not available, the property may be subject to inspection by the Town;
3. A seller's permit issued by the Wisconsin Department of Revenue;
4. A copy of the employer identification number issued by the Internal Revenue Service (FEIN #);
5. A copy of the Room Tax Permit (if applicable);
6. Provide Proof of Insurance (appropriate proof showing home is used for a short-term rental);
7. Floor plan and requested maximum occupancy;
8. Site plan including onsite parking;
9. Property Management Agreement (if applicable);
10. Certification from the property owner that the property meets the requirements of this Ordinance.

I state that I have read the foregoing answers, and the same are true to the best of my knowledge. I understand that any short term rental license is limited to all provisions of Ordinance #2018-01. I further agree that I will comply with all requirements of Ordinance #2018-01, including but not limited to the record keeping requirements.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

I understand that I must disclose on the application for a short term rental any and all amounts owed to the Town by the current or previous owner of the premises to be licensed. Any applicant failing to disclose such debts will have the license revoked.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

<b>OFFICE USE ONLY</b>					
Date Filed: _____			License Number: _____		
<b>TOWN APPROVAL</b>					
Outstanding Debt:	yes	no	Building Inspection:	yes	no
Fire Inspection:	yes	no			
Clerk:	Approved	Denied			
_____ Clerk or Designee Signature					
If Denied, Reason: _____					