



Short-Term Rental Registration

Property Owner Contact Information

Full Name: Last First

Mailing Address: Street Address Apartment/Unit #
City State ZIP Code

Cell Phone: Email:

Property Manager Contact Information (if different than owner)

Full Name: Last First

Cell Phone: Email:

Property Information

Short-Term Rental Address: Street Address Apartment/Unit #
City State ZIP Code

Maximum Occupancy for STR\* \_\_\_\_\_

Property Management Provider

- Airbnb Vrbo Booking.com
Tripadvisor HomeToGo Evolve
Vacasa Other(s):

State Licensing & Insurance Information

Wisconsin DOR Seller's Permit #:
DATCP Tourist Rooming House Permit #:
Property Insurance Company:
Policy number:

For Office Use Only

Permit #:
Date: