



# JUNEAU COUNTY HEALTH DEPARTMENT APPLICATION FOR LODGING PERMIT

*Your partners for  
a healthy  
community*

In accordance with Juneau County Public Health Ordinance #11B, I do hereby make application to the Juneau County Health Department for an operating permit for the license year July 1, 2023 to June 30, 2024. **Operating in any part of the fiscal year requires a permit.** Inspection and licensing services are being provided by the Wood County Health Department.

## PERMITS ARE NOT TRANSFERABLE

Establishment Name _____	
Establishment Address _____	City _____ Zip _____
Establishment Phone _____	
Owner Name _____ (List the individual, partnership, or corporation name and the agent)	
Owner email _____	Owner Phone _____
Owner Address _____	City _____ Zip _____
Management Name _____	
Management Address _____	City _____ Zip _____
Management Phone _____	Email _____
Preferred mailing address for license and correspondence: <input type="checkbox"/> Owner <input type="checkbox"/> Establishment <input type="checkbox"/> Management	
Signature of Applicant _____	Date _____

**- OVER -**

## Lodging

### Number of Rooms

- Hotel/Motel 5-30 Rooms
- Hotel/Motel 31-99 Rooms
- Hotel/Motel 100-199 Rooms
- Hotel/Motel 200 + Rooms
- Tourist Rooming House\*
- Bed and Breakfast

### Pre-Licensing Insp Fee

\$200.00  
\$300.00  
\$400.00  
\$500.00  
\$150.00  
\$150.00

### License Fee

\$266.00  
\$366.00  
\$461.00  
\$631.00  
\$250.00  
\$250.00

### Total Lodging

\$ \_\_\_\_\_

**\*For Tourist Rooming House licensees, what is your preferred month for yearly inspections?**

March

October

If owner/property manager does not live onsite, please provide Environmental Health Staff any helpful information to use to access property for yearly inspections (i.e. Key Code, Hidden Key location, etc.)

Note: Property owner associations/towns/villages etc. have the right to establish covenants and restrictions to regulate short term rentals. A Short-Term Rental License does not void or override those regulations. Please contact your respective property owners association/town/village etc. for information related to any restriction on short term rental use of your property.

## Water Supply

Private

Public

\*If you have a private well, do you have a water treatment system (RO, etc.)

Yes

No

If yes, do you prefer:  Raw water tested  Treated water tested  Both (additional fees would apply)

## Annual Water Testing Fee Per Well

\$ 50.00

(If on a private well, bacteria and nitrate only)

Additional charges may apply for repeat sampling.

## OTHER FEES

- NSF Fee (includes account closed or check non-payable) \$150.00
- Operating without a License Double License Fee
- No Certified Operator ... will be given 30-day warning for first offense \$150.00
- Special Inspection \$175.00
- Duplicate Permit \$ 20.00
- Re-inspection Fee (\$200.00 for each additional repeat inspection) \$ 100.00

### Total of Other Fees Due

\$ \_\_\_\_\_

Pre-Licensing Insp. Fee	License Fee	Other Fees (if applicable)	Total Fees
\$ _____	\$ _____	\$ _____	\$ _____
+	+	=	

Forward completed application and fee to:

Phone (715) 421-8911 or (715) 387-8646

Wood County Health Department

Attn: Environmental Health

111 W Jackson Street

Wisconsin Rapids WI 54495

Make check or money order payable to: **Wood County Health Department**