

**TOWN OF PRESQUE ISLE  
APPLICATION FOR ROOM TAX PERMIT**

Please answer all questions completely.

Please type or print clearly.

Return the completed application to:

Town Treasurer, Town of Presque Isle  
P O Box 130  
Presque Isle, WI 54557

**Name of property to be rented** \_\_\_\_\_

**Physical address of rental property** \_\_\_\_\_

**Name of owner** \_\_\_\_\_

**Mailing Address of Owner** \_\_\_\_\_

**E-mail address of Owner** \_\_\_\_\_

**Phone number of Owner** \_\_\_\_\_

**Legal Organization: Sole Proprietorship, Partnership, corporation, (Circle One)**

**Wisconsin Seller Permit #** \_\_\_\_\_

**Vilas County Sanitation Permit #** \_\_\_\_\_

**Do you utilize a Marketplace Rental Company - Yes** \_\_\_ **No** \_\_\_

**If so, what company/companies** \_\_\_\_\_

**I hereby certify that the answers to the above questions are correct to the best of my knowledge and belief.**

**Signature of Owner or Authorized Agent** \_\_\_\_\_

**Title** \_\_\_\_\_

**Date** \_\_\_\_\_