

DOOR COUNTY TOURISM ZONE COMMISSION

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DUE BY MAY 15, 2007 Year: _____

PO BOX 55 , Sister Bay, WI 54234 (920) 854-6200

<p>Check Applicable Box</p>
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New Application	<input type="checkbox"/>
Renewal Application	<input type="checkbox"/>

Email: DCTourismZoneCommission@gmail.com

PLEASE PRINT WITH BLACK INK

Business Information		Business Physical Location	
Business Name		Address or Fire Number (No P.O. numbers)	
Mailing Address	Municipality	State	Zip
Address 2		Phone Number	
City	State	Zip	Type of Lodging
<input type="checkbox"/> Hotel/Motel <input type="checkbox"/> Resort <input type="checkbox"/> Inn <input type="checkbox"/> Condominium Property <input type="checkbox"/> B & B <input type="checkbox"/> Cottage / Cabin <input type="checkbox"/> House <input type="checkbox"/> Other Number of units:			
<p>Owner or Owner's Agent</p> <p>Individual responsible for collecting and remitting the room tax. (see below)</p>			
Name			
Mailing Address (if the same as business leave blank)			
Address 2			
City	State	Zip	

Phone Number Cell phone:											
E-mail address: Fax number:											
Operating Period & Number of units available											
Indicate the total number of units available for rent during each month of the year.							<input type="checkbox"/> Open year round				
Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec
Certificate											
I, the undersigned, hereby apply for a Lodging Permit, certify that all the information both above and attached is true, and correct to the best of my knowledge.											
<hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> Signature Date Daytime Phone Number											
<hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> Print Name E-mail Address											
Approvals											
Date Received						Date Issued					

Approved By

Permit Number

In cases where the individual responsible for collecting and remitting the room tax changes, such as a change in ownership or a change in the owner's agent, the issuance of a new permit is required.

LODGING PERMIT APPLICATION