TOWN OF FARMINGTON APPLICATION FOR ROOM TAX PERMIT

Please answer all questions completely. Please <u>type</u> or <u>print</u> & return completed application along with your \$25.00 annual permit fee to:

E913 P	of Farmington Prairie View Ln ca, WI 54981
Name and address of Business:	
Phone: ()	
Legal Organization (Check One):	Sole Proprietorship Partnership Corporation
Wisconsin Sellers Permit No.	
Number of Rooms or Units available for rent:	
I hereby certify that the answers to the above statements are correct to the best of my knowledge and belief and that the above business is subject to Town of Farmington, Wisconsin Room Tax, regulations per Ordinance No. 12/21/20(2020).	
Signature of owner or authorized agen	t Title
Print name of owner or authorized age	nt Date
FOR OFFICE USE ONLY	
Date Received:	
Date Permit Issued:	
Receipt No.:	