



Lodging, Body Art, Campground, & Manufactured Home License Application

Submit Application with Fee to:

Marathon County Health Department
1000 Lake View Drive Suite 100
Wausau, WI 54403

OFFICE USE ONLY: Record ID: _____

For questions, to get help completing this application in another language, or to contact a sanitarian, call Environmental Health at (715) 261-1900 or Health@marathoncounty.gov.

Make checks payable to: Marathon County Health Department. License fees are non-refundable. Payments can be made with a credit/debit card at: <https://client.pointandpay.net/web/marathonhealthdept>

All information is required.

A. PLAN REVIEW

Plans showing facility layout with all equipment clearly labeled must be submitted to Environmental Health for approval for new or remodeled establishments.

Choose one:

Plan review required – new construction or remodel
Submit plans to: Health@marathoncounty.gov or
Marathon County Health Department, Environmental Health
1000 Lake View Drive Suite 100 Wausau, WI 54403

No plan review – existing facility, no remodeling

B. ESTABLISHMENT INFORMATION:

BUSINESS NAME: _____

STREET ADDRESS: _____

CITY, STATE, ZIP: _____

MUNICIPALITY (VILLAGE/TOWN/CITY): _____

WATER SUPPLY (CHECK ONE):

Public Private

SEWAGE DISPOSAL (CHECK ONE):

Public Private

LOCAL CONTACT PERSON: _____

LOCAL CONTACT PHONE NUMBER: _____

() -

LOCAL CONTACT EMAIL: _____

C. LICENSE HOLDER INFORMATION

LICENSE HOLDER LEGAL NAME (such as name of sole proprietor, partnership, LLC, LLP, or Inc.): _____

MAILING ADDRESS: _____

CITY, STATE, ZIP: _____

CONTACT PERSON: _____

CONTACT PERSON PHONE NUMBER: _____

() -

LICENSE HOLDER EMAIL: _____

D. LICENSE TYPE

Check one:

Hotel/Motel

Number of Rooms:

- 5 – 30
 31 – 99
 100 – 199
 200 or more

Tourist Rooming House (1-4 Rooms)

Bed and Breakfast

Body Art Establishment

- Tattoo
 Body Piercing
 Combined Tattoo *and* Body Piercing
 Temporary License - Tattooing and/or Body Piercing

Campground

Number of Campsites:

- 1 – 25
 26 – 50
 51 – 100
 101 – 199
 200 or more

Manufactured Home Community

Number of Sites:

- 1 – 20
 21 – 50
 51 – 100
 101 – 175
 176 or more

E. VERIFICATION AND SIGNATURE

All information requested on this application must be provided to obtain an establishment license. Operating without a license is a violation of Wisconsin Law. If you have been operating without a license, you will be required to pay an operating without a license fee equal to double the Annual Fee in addition to the License Fee. Licenses are not transferable between persons or locations. Licenses expire annually on June 30; unless issued on or after April 1, which will expire on June 30th of the following year. The license fee is not prorated for partial license years.

1. I, the undersigned, hereby make application for an establishment license for the establishment described herein and certify the accuracy of that information. I further certify I am the owner of the described establishment, or a duly authorized representative, and may sign this license application on behalf of the owner(s) of the establishment, and I have read and understand the requirements of this license and will operate the establishment in compliance with those requirements. I understand that failure to provide accurate information or to comply with any provisions of the license may render it null and void and may result in enforcement action.
2. I, the undersigned, hereby consent to entry on the premises of the establishment by employees of the Marathon County Health Department at any reasonable time to inspect for compliance with applicable rules and regulations associated with the license. This consent is valid for the term of the license.

SIGNATURE – APPLICANT:

DATE SIGNED:

Lodging, Body Art, Campground, & Manufactured Home License Fees

Check the box next to your appropriate license fee.

License Type	Number of Rooms, Sites or Category	Annual Fee	State Reimbursement Fee	Pre-inspection (PI) Fee	License Fee (Annual + Reimbursement + PI)	
Lodging (Hotel/Motel)	5-30 Rooms	\$588.35	\$26.65	\$615.00	\$1,230.00	<input type="checkbox"/>
	31-99 Rooms	\$658.60	\$36.40	\$695.00	\$1,390.00	<input type="checkbox"/>
	100-199 Rooms	\$729.85	\$46.15	\$776.00	\$1,552.00	<input type="checkbox"/>
	200 + Rooms	\$1,096.30	\$63.70	\$1,160.00	\$2,320.00	<input type="checkbox"/>
Tourist Rooming House	1-4 Rooms	\$285.70	\$14.30	\$300.00	\$600.00	<input type="checkbox"/>
Bed and Breakfast	N/A	\$285.70	\$14.30	\$300.00	\$600.00	<input type="checkbox"/>
Body Art	Tattoo or Piercing	\$198.50	\$13.50	\$212.00	\$424.00	<input type="checkbox"/>
	Temporary Tattoo or Piercing	\$198.00	\$10.00	\$208.00	\$416.00	<input type="checkbox"/>
	Tattoo and Piercing	\$298.00	\$22.00	\$320.00	\$640.00	<input type="checkbox"/>
	Temporary Tattoo & Piercing	\$298.00	\$10.00	\$308.00	\$616.00	<input type="checkbox"/>
Campground	1-25 Sites	\$366.25	\$22.75	\$389.00	\$778.00	<input type="checkbox"/>
	26-50 Sites	\$429.50	\$32.50	\$462.00	\$924.00	<input type="checkbox"/>
	51-100 Sites	\$490.35	\$39.65	\$530.00	\$1,060.00	<input type="checkbox"/>
	101-199 Sites	\$614.85	\$46.15	\$661.00	\$1,322.00	<input type="checkbox"/>
	200+ Sites	\$730.70	\$53.30	\$784.00	\$1,568.00	<input type="checkbox"/>

License Type	Number of Rooms, Sites or Category	Annual Fee	State Reimbursement Fee	DSPS Water Surcharge	Pre-inspection (PI) Fee	New License Fee (Annual + Reimbursement + DSPS Surcharge + PI)	
Manufactured Home Communities	1-20 sites	\$394.75	\$46.25	\$40.00	\$481.00	\$962.00	<input type="checkbox"/>
	21-50 sites	\$504.75	\$83.25	\$72.00	\$660.00	\$1,320.00	<input type="checkbox"/>
	51-100 sites	\$646.50	\$129.50	\$112.00	\$888.00	\$1,776.00	<input type="checkbox"/>
	101-175 sites	\$815.50	\$166.50	\$144.00	\$1,126.00	\$2,252.00	<input type="checkbox"/>
	176 + sites	\$995.00	\$185.00	\$160.00	\$1,340.00	\$2,680.00	<input type="checkbox"/>