



City of **MENOMONIE**

clerk@menomonie-wi.gov

(715) 232-2221 Ext 1006

800 Wilson Avenue
Menomonie, WI 54751

Mobile Home Park License Application

License Expires June 30th, 20_____

Name: _____
(First) (Middle) (Last)

Date of Birth: _____ Phone Number: _____

Street Address: _____

City: _____ State: _____

Zip Code: _____

Corporate Name: _____

Trade Name of Mobile Home Park: _____

Location of Mobile Home Park: _____

Legal Description of Mobile Home Park: _____

Complete plans/specifications attached (Prepared by a registered engineer): ☐ Yes ☐ No

of Lots in Mobile Home Park: _____ License Fee \$2.00 for each space, but not less than \$50.00

I hereby authorize the Menomonie Police Department to furnish all information pertaining to my application for a mobile home park license to the licensing authorities of the City of Menomonie. This release is authorized with full understanding that the information will be safeguarded against unauthorized disclosure to any party not having a legitimate need for it in the property discharge of official business of the City of Menomonie.

I hereby release the City of Menomonie, its officers and employees from any liability for damages which may results to me on account of compliance with this authorization.

Applicant Signature & Date

Fee Paid: _____ (Code 27 – License Fee _____; + Code 48 - \$10.00 Investigation Fee)

Receipt: _____ (01.43410)