

# Lodging, Body Art, and 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@co.marathon.wi.us](mailto:Health@co.marathon.wi.us).

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

A plan review may be required for new construction or for establishments with remodels or other significant changes.

**Choose one:**

- New construction, remodel or other changes. A sanitarian will contact you to see if a plan review is needed.
- Existing facility, no remodeling or changes.

## 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 CONTACT 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, and Manufactured Home License Fees

Check the box next to your appropriate license fee. License fees effective 1/1/2024.

License Type	Number of Rooms, Sites or Category	Annual Fee	State Reimbursement Fee	Pre-inspection (PI) Fee	License Fee (Annual + Reimbursement + PI)	<input type="checkbox"/>
<b>Lodging (Hotel/Motel)</b>	5-30 Rooms	\$519.15	\$24.60	\$543.75	\$1,087.75	<input type="checkbox"/>
	31-99 Rooms	\$581.06	\$33.60	\$614.66	\$1,229.32	<input type="checkbox"/>
	100-199 Rooms	\$643.80	\$42.60	\$686.40	\$1,372.80	<input type="checkbox"/>
	200 + Rooms	\$967.80	\$58.80	\$1,026.60	\$2,053.20	<input type="checkbox"/>
<b>Tourist Rooming House</b>	1-4 Rooms	\$252.00	\$13.20	\$265.20	\$530.40	<input type="checkbox"/>
<b>Bed and Breakfast</b>	N/A	\$252.00	\$13.20	\$265.20	\$530.40	<input type="checkbox"/>
<b>Body Art</b>	Tattoo or Piercing	\$174.90	\$13.50	\$188.40	\$376.80	<input type="checkbox"/>
	Temporary Tattoo or Piercing	\$174.90	\$13.50	\$188.40	\$376.80	<input type="checkbox"/>
	Tattoo and Piercing	\$262.90	\$22.00	\$284.90	\$569.80	<input type="checkbox"/>
	Temporary Tattoo and Piercing	\$262.90	\$10.00	\$272.90	\$545.80	<input type="checkbox"/>
<b>Campground</b>	1-25 Sites	\$323.40	\$21.00	\$344.40	\$688.80	<input type="checkbox"/>
	26-50 Sites	\$378.99	\$30.00	\$408.99	\$817.98	<input type="checkbox"/>
	51-100 Sites	\$433.13	\$36.60	\$469.73	\$939.46	<input type="checkbox"/>
	101-199 Sites	\$542.85	\$42.60	\$585.45	\$1,170.90	<input type="checkbox"/>
	200+ Sites	\$645.26	\$49.20	\$694.46	\$1,390.92	<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 + PI)	<input type="checkbox"/>
<b>Manufactured Home Communities</b>	1-20 sites	\$348.67	\$6.25	\$40.00	\$348.67	\$749.84	<input type="checkbox"/>
	21-50 sites	\$445.37	\$11.25	\$72.00	\$445.37	\$985.74	<input type="checkbox"/>
	51-100 sites	\$570.63	\$17.50	\$112.00	\$588.13	\$1,288.26	<input type="checkbox"/>
	101-175 sites	\$719.99	\$22.50	\$144.00	\$742.49	\$1,628.98	<input type="checkbox"/>
	176 + sites	\$878.08	\$25.00	\$160.00	\$903.08	\$1,966.16	<input type="checkbox"/>