



Short-Term Rental Licensing Checklist

Deadline is extended to January 20, 2024.

- Complete the application for a short-term rental license. An application and fee are required *for each* short term rental you own.
- Submit \$150 fee with the completed application.
The fee, application, and documentation listed below can be mailed or delivered to:

Two Rivers City Hall
Attn: Short Term Rental License
1717 E. Park Street
Two Rivers, WI 54241
Checks are made to: City of Two Rivers

For questions contact Elizabeth Runge,
Community Development Director

Email: erunge@two-rivers.org
Phone: (920) 793-5564

Submit and verify* the following documents are current:

- Copy of State of Wisconsin License for a Tourist Rooming House License issued by Manitowoc Public Health Division under Wis Stat. Sec. 254.64.
- Copy of completed State Lodging Establishing Inspection from Manitowoc Public Health dated within one year of the date of issuance or renewal.
- Proof of casualty and liability insurance of the STR dwelling unit. The insurance is to be not less than \$300,000 per individual occurrence and not less than \$1,000,000 in the aggregate.

***All three of the documents listed above must be dated or issued within 1 year of this 2024 short-term rental application.**

If you applied for a 2023 short term rental license and provided the above documentation and they are within 1 year of this 2024 application, you do not need to re-submit the documents until they have been renewed.

If this is your first application, these documents are required by the City's Short Term Rental ordinance, Chapter 6-13 Licensing of Short-Term Rentals. The City's ordinance is located at: https://library.municode.com/wi/two_rivers/codes/code_of_ordinances.



TWO RIVERS
WISCONSIN

Short-Term Rental Application

License Expires Each Year
on December 31
Fee \$150

ONLY APPLICATIONS COMPLETED IN FULL AND SUBMITTED WITH ALL REQUIRED DOCUMENTS AND FEES WILL BE ACCEPTED. COMPLETED APPLICATIONS ARE TO BE SUBMITTED TO THE CITY CLERK.

SHORT-TERM RENTAL (STR) SITE INFORMATION:

NAME OF STR: _____

ADDRESS: _____

PHONE: _____

STR WEBSITE: _____

STATE LODGING LICENSE #: _____

Tell us how you would like to be listed on the Explore Two Rivers website



OWNER INFORMATION:

NAME: _____

PHYSICAL ADDRESS: _____
Street Address City State Zip

MAILING ADDRESS: _____
Street Address City State Zip

PHONE: _____

EMAIL: _____

DATE OF BIRTH: _____

IS OWNER ALSO SHORT-TERM RENTAL PROPERTY MANAGER? YES NO

(If no, complete property manager information below)

PROPERTY MANAGER INFORMATION:

NAME: _____

PHYSICAL ADDRESS: _____
Street Address City State Zip

MAILING ADDRESS: _____
Street Address City State Zip

24-HOUR CONTACT PHONE: _____

EMAIL: _____

DATE OF BIRTH: _____



ADDITIONAL CONTACT FOR SHORT-TERM RENTAL:

(Two more contacts may be listed on page 3)

NAME: _____

PHYSICAL ADDRESS: _____
Street Address City State Zip

MAILING ADDRESS: _____
Street Address City State Zip

24-HOUR CONTACT PHONE: _____

EMAIL: _____

DATE OF BIRTH: _____

REQUIRED ITEMS TO BE SUBMITTED WITH APPLICATION:

- Copy of State of Wisconsin License for a Tourist Rooming House License issued by Manitowoc County Public Health Division under Wis. Stat. Sec. 254.64 *(issuance date must be within one year of STR application)*
- Copy of completed State Lodging Establishment Inspection from Manitowoc County Public Health Division *(must be dated within one year of STR application)*
- Proof of casualty and liability insurance of the STR dwelling unit not less than \$300,000 per occurrence/\$1,000,000 aggregate

By signing below, I am stating that my answers are true and correct to the best of my knowledge. I understand that any short-rental licenses shall comply with all provisions of the Two Rivers Municipal Code. I hereby designate the property manager, if any, as an agent for the purposes of accepting service of process in any civil action arising of, or in conjunction with, the use of this license. I understand that licenses may be revoked in debts are owed to the City or other requirements of Two Rivers Municipal Code Chapter 6-13-6 are not in compliance.

OWNER SIGNATURE: _____ DATE: _____

SIGNATURES OF AUTHORIZED PROPERTY MANAGER(S), IF ANY:

SIGNATURE: _____ DATE: _____

SIGNATURE: _____ DATE: _____

SIGNATURE: _____ DATE: _____

REMIT APPLICATION, FEES, AND REQUIRED DOCUMENTATION TO:

TWO RIVERS CITY CLERK
PO BOX 87
TWO RIVERS, WI 54241

FOR OFFICE USE ONLY

DATE RECEIVED: _____

APPROVED? YES NO

REQUIRED MATERIALS RECEIVED? YES NO

APPROVAL DATE: _____

DATE LICENSE FEE RECEIVED: _____

ISSUANCE DATE: _____

LATE FEE? YES NO

REASON FOR DENIAL: _____

DATE LATE FEE RECEIVED: _____