

**CITY OF MENOMONIE**  
**Application for MOBILE HOME PARK LICENSE**

Date of Application \_\_\_\_\_ License expires: June 30, 20\_\_\_\_

Name of Applicant \_\_\_\_\_  
(First) (Middle) (Last)

Corporate Name \_\_\_\_\_

Address of Applicant \_\_\_\_\_

Applicant phone number \_\_\_\_\_ Email address \_\_\_\_\_

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) \_\_\_\_\_

Number 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, it's officers and employees from any liability for damages which may result to me on account of compliance with this authorization.

\_\_\_\_\_  
Signature of Applicant

Fee Paid: \_\_\_\_\_ Code 27 – License fee \_\_\_\_\_; + Code 48 – \$10.00 - Investigation fee  
Receipt Number: \_\_\_\_\_ (Acct. # 01.43410) City Code - Title 3, Chapter 17

**For Office Use:**

Date Investigation Complete: \_\_\_\_\_ (circle one)  
Approve Deny

Initials of Records Technician (or person who conducted investigation) \_\_\_\_\_

Signature of Police Chief (or designated staff officer) \_\_\_\_\_

City Treasurer's office - verification that all monthly parking fees are paid to date: \_\_\_\_\_

Date of appeal to the Board of Zoning Appeals (if required): \_\_\_\_\_

Date submitted to the City Council for approval: \_\_\_\_\_

Copies to: Building Inspector Date of inspection: \_\_\_\_\_

Fire Department; Health Officer; and Police Department - date: \_\_\_\_\_