

Town of Lawrence

2400 Shady Ct. • De Pere, WI 54115

P: 920.336.9131 F: 920.336.9193

www.lawrencewi.gov

Short-Term Rental Permit Application Process

A short-term rental is an accommodation for transient guests where, in exchange for compensation, a residential dwelling unit is provided for lodging for a period of less than 28 consecutive days.

The Town of Lawrence ordinance requires that those wishing to rent their property on a short-term basis obtain a Town of Lawrence Short-Term Rental Permit. Short-term rentals apply to all existing dwelling units regardless of legal conforming or legal nonconforming status and regardless of zoning districts.

Prior to occupancy or advertising a property for or as a short-term rental, the property owner shall obtain a Short-Term Rental Permit. Review and approval of a Short-Term Rental Permit application may take up to 20 business days, assuming all needed information is supplied.

Initial/First application for a Short-Term Rental Permit

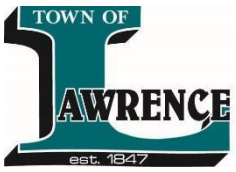
- Completed Short-Term Rental Permit application
- Completed Short-Term Rental: Property Manager application
- Application fee(s)
- Proof of registration with Town of Lawrence Clerk/Treasurer regarding Brown County room tax requirement
- Proof of registration with Brown County Health Department
- A lease agreement example
- Proof of condominium association approval, if applicable
- Proof of property owner consent to rent unit, if applicable
- Proof of insurance
- Necessary permits and proof of registration required in Chapter 240 of Lawrence Municipal Code

Renewal of an existing Short-Term Rental Permit

A Short-Term Rental Permit is valid for one calendar year running from July 1 through June 30. It may be renewed annually and must be received no later than July 1 to be considered a renewal. Renewal applications must include:

- Completed Short-Term Rental Permit application
- Completed Short-Term Rental: Property Manager application
- Application fee(s)
- Updated proof of insurance
- Any other information that has changed from the previous year's permit application submittal.

All required application materials must be submitted at the same time. Applications that are not complete at submission will be returned to the applicant without processing. Once the Short-Term Rental Permit Application has been processed, a permit card will be issued to the property owner and must be installed so as to be visible from the street right-of-way on which the principal structure is addressed on.



Town of Lawrence

2400 Shady Ct. • De Pere, WI 54115

P: 920.336.9131 F: 920.336.9193

www.lawrencewi.gov

Frequently Asked Questions

Q. Is my rental property considered a short-term rental?

A. A short-term rental is defined as a dwelling unit in which paying guests are entitled to occupancy for a period of less than 28 calendar days.

Q. If I rent my property for more than 30 days, do I have to get a Short-Term Rental Permit?

A. No. Properties that are rented for more than 28 days are exempt from the short-term rental ordinance.

Q. How long is a Short-Term Rental Permit valid for?

A. The permit is valid for 12 months starting on July 1 and ending June 30 and must be renewed annually.

Q. Is there a fee for Short-Term Rental Permit?

A. Yes. The initial Fee is \$500.00. The annual renewal fee is \$500.00. Additional fees apply for property manager application and additional short term rental units.

Q. If I sell my property, is my Short-Term Rental Permit transferable?

A. The permit is not transferable. If the property changes ownership, a new permit will be required.

Q. What if I don't get a Short-Term Rental Permit?

A. Failure to secure a permit will result in Town enforcement, which may include financial penalties and legal action.

Q. My property is leased through Airbnb or another rental agency. Do I still need a Short-Term Rental Permit?

A. Yes, The Town requires a municipal permit regardless of how the rental is advertised.

Q. What if I miss my renewal date (not sent in before July 1)?

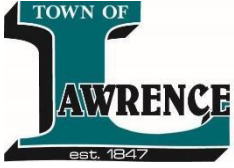
A. The permit will be voided, and a new Short-Term Rental Permit will need to be submitted.

Q. Does my permit apply to multiple properties?

A. A separate application and Short-Term Rental Permit must be obtained for each dwelling unit used as a short-term rental.

Q. Can I advertise my short-term rental on-site?

A. No. The ordinance excludes advertising the availability of a short-term rental to the public on-site except for the required permit place card.



Town of Lawrence

2400 Shady Ct. • De Pere, WI 54115

P: 920.336.9131 F: 920.336.9193

www.lawrencewi.gov

Short-Term Rental Permit Application

Please complete and submit the following information to the Town of Lawrence Town Hall

_____ New Application for Short-Term Rental Permit

OR

_____ Renewal Application for Short-Term Rental Permit

_____ New Application for Short-Term Rental: Property Manager

OR

_____ Renewal Application for Short-Term Rental: Property Manager

_____ Proof of registration with the Town of Lawrence Clerk/Treasurer regarding Brown County Room Tax Requirements

_____ Proof of registration with the Brown County Health Department.

_____ A lease agreement example provided that indicates language regarding compliance with parking, noise, and other applicable Town of Lawrence ordinances being met during occupancy of the structure.

_____ Proof of condominium association approval, if applicable

_____ Proof of property owner consent to rent the dwelling unit

_____ Proof of Insurance

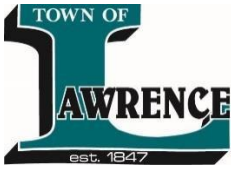
Address of Short-Term Rental Property: _____

Parcel # of Short-Term Rental Property: _____

Number of Bedrooms: _____ Number of Parking spaces provided on-site: _____

PLEASE NOTE: All required materials MUST be submitted at the same time. Incomplete applications will NOT be processed but returned to the applicant.

A separate application must be submitted for each short-term rental property/unit.



Town of Lawrence

2400 Shady Ct. • De Pere, WI 54115

P: 920.336.9131 F: 920.336.9193

www.lawrencewi.gov

LICENSE EXPIRES EACH YEAR (ANNUALLY) ON JUNE 30

TYPE	FEE
<input type="checkbox"/> New	\$500.00
<input type="checkbox"/> Renewal	\$500.00

Short-Term Rental Application

This completed application must be submitted with all other required documents & fees (paid in full) in order to be accepted. Following submittal of complete application packet and fees, you will be contacted to schedule fire & building inspections.

Short-Term Rental (STR) Site Information

Address _____

Parcel ID # _____ Maximum Occupancy _____ State Lodging License # * _____

FEIN # _____ WI Seller's Permit # * _____ *Wisconsin Tourist Rooming Houses License*

* Copies of permits/licenses must be included with application

Owner Information

Name _____

Address _____

Phone _____ Date of Birth _____ Email _____

Owner is also Property Manager YES NO (If no, complete Property Manager Information below)

Property Manager Information (if not Owner)

Name _____

Address _____

Phone _____ Date of Birth _____ Email _____

Items to Submit with Application (REQUIRED AT TIME OF SUBMITTAL)

- Copy of State of Wisconsin License for a Tourist Rooming House License issued by Brown County Public Health Division under Wis. Stat. Sec. 254.64
- Copy of completed State Lodging Establishment Inspection form from Brown County Public Health Division dated within one year of the date of issuance or renewal
- Proof of dwelling insurance
- Copy of Seller's Permit from the Department of Revenue
- Floor plan and requested maximum occupancy
- Site plan including available on-site parking
- Completed Short Term Rental Property Manager Application (if applicable)
- Employer identification number (FEIN) issued by the Internal Revenue Service (if applicable)

I state that I have read the foregoing answers and the same are true to the best of my knowledge. I understand that any short -term rental license shall comply with all provisions of Lawrence Municipal Code Chapter 240, and I hereby certify that the property meets those requirements. I hereby additionally designate the Property Manager, if any, as an agent for the purposes of accepting service of process in any civil action arising out of/or in conjunction with the use of this license. Lawrence Municipal Code 240-5(D) requires that every applicant must disclose on his or her application for any license any and all amounts of money owed to the Town by the applicant or the property's prior owner. Any applicant failing to disclose such debts will not be issued a license until all debts are paid in full. I hereby further certify that I do not have any outstanding debts owing the Town of Lawrence

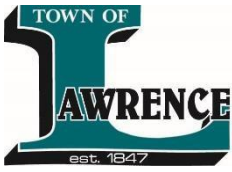
Owner Signature: _____ Date: _____

Remit application, fees and all other required documents to:

Clerk-Treasurer, Town of Lawrence, 2400 Shady Ct., De Pere, WI 54115

FOR OFFICE USE ONLY			
Date Received: _____	\$500 Fee Paid: <input type="checkbox"/> yes / <input type="checkbox"/> no	License #: _____	
Outstanding Debt: <input type="checkbox"/> yes / <input type="checkbox"/> no	Fire Inspection: <input type="checkbox"/> yes / <input type="checkbox"/> no	Building Inspection: <input type="checkbox"/> yes / <input type="checkbox"/> no	
License Approved: <input type="checkbox"/> yes / <input type="checkbox"/> no	Clerk/Treasurer Signature: _____	Date: _____	
Explanation, if denied: _____			

Once license is received, the Property Owner or Property Manager shall notify the Office of the Clerk-Treasurer IN WRITING when the first rental begins



Town of Lawrence
 2400 Shady Ct. • De Pere, WI 54115
 P: 920.336.9131 F: 920.336.9193
 www.lawrencewi.gov

LICENSE EXPIRES EACH YEAR
 (ANNUALLY) ON JUNE 30

\$250 per additional unit
 Primary (1st) STR. License #:

Short-Term Rental: Additional Unit Application

This completed application must be submitted with all other required documents & fees (paid in full) in order to be accepted. Following submittal of complete application packet and fees, you will be contacted to schedule fire & building inspections.

Short-Term Rental (STR) Site Information

Address _____
 Parcel ID # _____ Maximum Occupancy _____ State Lodging License #* _____
 FEIN # _____ WI Seller's Permit #* _____

* Copies of permits/licenses must be included with application

Owner Information

Name _____
 Address _____
 Phone _____ Date of Birth _____ Email _____

Owner is also Property Manager YES NO (If no, complete Property Manager Information below)

Property Manager Information (if not Owner)

Name _____
 Address _____
 Phone _____ Date of Birth _____ Email _____

Items to Submit with Application (REQUIRED AT TIME OF SUBMITTAL)

- Copy of State of Wisconsin License for a Tourist Rooming House License issued by Brown County Public Health Division under Wis. Stat. Sec. 254.64
- Copy of completed State Lodging Establishment Inspection form from Brown County Public Health Division dated within one year of the date of issuance or renewal
- Proof of dwelling insurance
- Copy of Seller's Permit from the Department of Revenue
- Floor plan and requested maximum occupancy
- Site plan including available on-site parking
- Completed Short Term Rental Property Manager Application (if applicable)
- Employer identification number (FEIN) issued by the Internal Revenue Service (if applicable)

I state that I have read the foregoing answers and the same are true to the best of my knowledge. I understand that any short-term rental license shall comply with all provisions of Lawrence Municipal Code Chapter 240, and I hereby certify that the property meets those requirements. I hereby additionally designate the Property Manager, if any, as an agent for the purposes of accepting service of process in any civil action arising out of or in conjunction with the use of this license. Lawrence Municipal Code Chapter 240-5(D) requires that every applicant must disclose on his or her application for any license any and all amounts of money owed to the Town by the applicant or the property's prior owner. Any applicant failing to disclose such debts will not be issued a license until all debts are paid in full. I hereby further certify that I do not have any outstanding debts owing the Town of Lawrence.

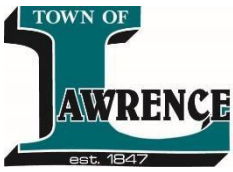
Owner Signature: _____ Date: _____

Remit application, fees and all other required documents to:

Clerk-Treasurer, Town of Lawrence, 2400 Shady Ct., De Pere, WI 54115

FOR OFFICE USE ONLY			
Date Received: _____	\$250 Fee Paid: <input type="checkbox"/> yes / <input type="checkbox"/> no	License #: _____	
Outstanding Debt: <input type="checkbox"/> yes / <input type="checkbox"/> no	Fire Inspection: <input type="checkbox"/> yes / <input type="checkbox"/> no	Building Inspection: <input type="checkbox"/> yes / <input type="checkbox"/> no	
License Approved: <input type="checkbox"/> yes / <input type="checkbox"/> no	Clerk/Treasurer Signature: _____	Date: _____	
Explanation, if denied:			

Once license is received, the Property Owner or Property Manager shall notify the Office of the Clerk-Treasurer IN WRITING when the first rental begins



Town of Lawrence

2400 Shady Ct. • De Pere, WI 54115
P: 920.336.9131 F: 920.336.9193
www.lawrencewi.gov

LICENSE EXPIRES EACH YEAR
(ANNUALLY) ON JUNE 30

	TYPE	FEE
<input type="checkbox"/>	New	\$100.00
<input type="checkbox"/>	Renewal	\$100.00

Short-Term Rental: Property Manager Application

Property Manager must be on call 24/7 and reside within 25 miles of the Town of Lawrence. This completed application must be submitted along with all fees (paid in full)

Applicant Information

Name _____

Address _____

Phone _____ Date of Birth _____ Email _____

Applicant Criminal History

HAVE YOU EVER been convicted of a felony or misdemeanor of any offense involving dishonesty, fraud, deceit, robbery, the use or threatened use of force or violence upon the person of another? Yes / No

If YES, please list all convictions below. If more space needed, please use back of this application.

Year	Offense / Conviction	Agency

Do you have any PENDING charges? Yes / No

If YES, please list pending charges below. If more space needed, please use back of this application.

Year	Offense / Arrest	Agency

Properties Managed (If more space is needed, please include additional properties on a separate page)

- Address
Parcel ID # _____ STR License # _____ Owner Name _____
- Address
Parcel ID # _____ STR License # _____ Owner Name _____
- Address
Parcel ID # _____ STR License # _____ Owner Name _____
- Address
Parcel ID # _____ STR License # _____ Owner Name _____

I state that I have read the foregoing answers and the same are true to the best of my knowledge. I understand that any short-term rental license shall comply with all provisions of Lawrence Municipal Code Chapter 123-2A, and I hereby certify that the properties meet those requirements. I further acknowledge that I may be the agent for the purposes of accepting service of process in any violation of the Lawrence Municipal Code arising out of/or in conjunction with the use of the short-term rental licenses.

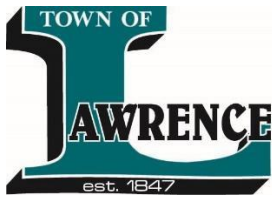
Applicant Signature: _____ Date: _____

Remit application & fees to:

Clerk-Treasurer, Town of Lawrence, 2400 Shady Ct., De Pere, WI 54115

<i>FOR OFFICE USE ONLY</i>	
Date Received: _____ \$100 Fee Paid: <input type="checkbox"/> yes / <input type="checkbox"/> no	License #: _____
Criminal History Checked: <input type="checkbox"/> yes / <input type="checkbox"/> no	Employee Initial: _____ Chief of Public Safety Check: <input type="checkbox"/> yes / <input type="checkbox"/> no
License Approved: <input type="checkbox"/> yes / <input type="checkbox"/> no	Clerk/Treasurer Signature: _____ Date: _____
Explanation, if denied: _____	

Town Clerk/Treasurer must be notified in writing when additional properties are added to management



APPLICATION FOR
**HOTEL, MOTEL AND SHORT-TERM RENTAL
ROOM TAX LICENSE**

TOWN OF LAWRENCE

NAME OF ESTABLISHMENT _____

ADDRESS OF ESTABLISHMENT OR SHORT-TERM RENTAL

OWNER _____

OWNER'S ADDRESS

TELEPHONE NUMBER _____

EMAIL ADDRESS _____

If Corporation, NAME OF REGISTERED AGENT _____

If Corporation, NAME OF RESIDENT MANAGER _____

STATE SALES TAX NUMBER _____

NUMBER OF ROOMS _____

The applicant hereby authorizes the Lawrence Town Clerk – Treasurer to make the necessary examination and inspection of all books, records and memoranda as required ensuring the enforcement of all provisions of Chapter 40 of the Lawrence Municipal Code.

Signature of Applicant

Date

SUBMIT COMPLETED APPLICATION TO:

Town of Lawrence
Office of the Clerk – Treasurer
2400 Shady Ct.
De Pere, WI 54115

THE 8% ROOM TAX, collected on retail room rental or lodging is due and payable on or before the 20th day of the following month. Make check, draft, money order payable, or electronic payment(1) to: Associated Trust Company and return with copy to:

*** Associated Trust Company, Attn: Corporate Trust, 200 N Adams St, Green Bay, WI 54301 ***

Unpaid taxes bear interest at 1.0% per month from the due date and the assessment of a \$100.00 late fee.

PART I - Facility, Owner and Preparer Information

Tax Report for: | Month: | Year: | Permit No:

I declare under penalty of perjury that the room sales information contained on this document and any accompanying documents is true and correct, with full knowledge that all information made on this document are subject to investigation and that any false information may be grounds for legal action.

Facility Name & Address: Owner Name & Address: Preparer Information

Name Name Preparer Name
Street, Suite, PO Box Street, Suite, O Box Preparer Phone Number
City, State Zip City, State Zi p Preparer Signature

PART II - Short Term Rental Information

If you rented through AirBNB, VRBO or similar web-based lodging marketplaces who have collected on your behalf, please include in your totals above AND provide detailed information below for each marketplace. Failure to provide exempt tax receipt information will deem the room tax delinquent and late fees and interest will be assessed.

Table with 5 columns: Description, AirBNB, VRBO, Other (1), Other (2), Total. Rows include Gross Room Nights Sold, Tax Exempt Room Nights Sold, Total Room Sales Revenue, Less: Tax Exempt Room Sales Revenue, Total Taxable Room Sales, 8% Room Tax, Late Filing Fee, Interest, and TOTAL TAX DUE.

Contact Associated Trust Company directly at 920-433-3275 for electronic submission (payment) instructions.

PART III - Tax Exempt Guest Information for Short-Term Rentals

Please summarize all tax exempt guest information below. Failure to provide exempt tax receipt information will deem the room tax delinquent and late fees and interest will be assessed.

Tax Exempt Organizations - List the organization name(s) and the corresponding number of nights stayed

Table with 4 columns: Name(s) of Organization(s), Nights, Name(s) of Organization(s), Nights. Includes blank rows for data entry.

Customers Staying 30 Days or More

Number of Different Customers
Number of Room Nights Sold
Total Tax-Exempt Room Nights Sold