

## Village of Fontana-on-Geneva Lake 175 Valley View Drive • PO Box 200 • Fontana, WI 53125

Phone: 262-275-6136 • Fax: 262-275-8088

OCCUPANCY INSPECTION APPLICA General Building Code Compliance	TION Date application was received:
For Short Term Rental Use Vacation Rental Homes and Tourist Rooming Houses	
ANNUAL FEE REQUIRED: \$100.00 *Non-Refundable*	
Corrections and re-inspection required within 30 days	
Physical Address of Site:	
Tax Parcel Number:	
Property Owner Information	
Name:	
Mailing Address:	
EMail:	
Phone:	
FOR TOURIST ROOMING HOUSES ONLY:	
My Short-Term Rental application is for a Tourist Rooming	House, and I certify that the 180-day rental
period will be between (date) and	_(date).
For Inspection Contact:	Phone:
Owner/Applicant Signature	Date
For Office Use Only	
Check No Name:	Amount:
Inspection Date:	
PASS	
FAIL: Corrections and re-inspection required within 30	days
Findings/Comments:	
Inspector Signature:	Date: