New:	·	(Must submit plans & specs)	License Fee:
Renewal:		-	Invoice #:
		APPLICATION FOR <i>MOBILE HON</i> (\$100.00 for each 50 s	
To th	e Common Cou	incil of the City of La Crosse:	
1.	APPLICANT: Name:		
	Address:		
2.	MOBILE HON Name:	ME PARK:	
	Address:		
3.	Number of lo	ts in the Mobile Home Park:	(MUST FILL IN #)
4.	OWNER OF LAND: (*If the owner of the land is not the same as the operator of the Mobile Home Park the verified statement from the owner of the land is required.)		
	Name:		
	Address:		
		nkes application for a Mobile Home Park Lico ode of Ordinances of the City of La Crosse.	ense within the City of La Crosse pursuant to
Signature of Applica		nt:	Date:
Licen	se Period:		
		*OWNER VERIFICA	ΓΙΟΝ
The c	owner of the lan	d for the Mobile Home Park known as	
verifie	es that the appli	cant for the Mobile Home Park License	
is aut	thorized to cons	truct or maintain the aforesaid Mobile Hom	e Park and make the application for such
licens	se.		
Signature of Land Owner:		wner:	Date:
	cribed and swo	rn to before ay of, 20	
	ry Public	County, Wisconsin	
Му С	Commission exp	County, Wisconsin ires:	
OFFI	CE USE ONLY	: Customer #:	