

CITY OF RHINELANDER

NON-Resident Seasonal Launch Permit



NON-RESIDENT Permit Application

ALL the information must be provided for approval!

Name: _____

Address: _____
(Street address -NO PO Boxes, City, State and Zip)

Home Phone Number: _____ Cell Number: _____

TRAILER MAKE: _____

BOAT MAKE: _____

DNR Boat Registration #: _____ Expires: _____

****RETURN FORM TO CITY HALL, CLERKS OFFICE, 135 S. STEVENS STREET, RHINELANDER****

OUT-OF-DISTRICT FEE: \$20.00 each permit. EACH additional permit is **\$10.00**.

Permit sticker MUST be affixed to the top of the tongue of the trailer.

I hereby certify that I am the above named person. I understand that obtaining this permit under false statements is punishable under State Statutes. I understand that I cannot transfer this permit to any other trailer other than the above.

Date: _____

Signature: _____

OFFICE USE ONLY

Permit #: _____

Action Taken: Approved Denied Details: _____

Signature of Issuing Official: _____