

## Application for Hotel License

*Make check payable to:*  
North Central Iowa Regional Inspection Division  
22 North Georgia, Suite 300  
Mason City, IA 50401

Date of Application: \_\_\_\_\_  
New Application?:  YES  NO  
If new, opening date: \_\_\_\_\_  
Has ownership changed since last license  
issued?  YES  NO  
If yes, give previous owner & business  
name: \_\_\_\_\_

Name of Hotel \_\_\_\_\_

Owner \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone No. (        ) \_\_\_\_\_

Mailing address for all correspondence if different than above:

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

ANY CHANGE IN LOCATION OR OWNERSHIP REQUIRES A NEW LICENSE, NEW LICENSES ARE NOT TRANSFERABLE  
CURRENCY SENT AT OWNER'S RISK.

The fee for this license, which is provided by Chapter 137C, is as follows:

- \_\_\_\_\_ \$27.00 (1 to 15 guest rooms)
- \_\_\_\_\_ \$40.50 (16 to 30 guest rooms)
- \_\_\_\_\_ \$54.00 (31 to 75 guest rooms)
- \_\_\_\_\_ \$57.50 (76 to 150 guest rooms)
- \_\_\_\_\_ \$101.25 (over 150 guest rooms)

Enclosed is \$\_\_\_\_\_ in payment for a hotel license to operate a hotel, inn, motel, or motor inn.

Containing \_\_\_\_\_ number of guest rooms.

SIGNATURE \_\_\_\_\_

