



202 Parkway Avenue South | P.O. Box 333
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www.lanesboro-mn.gov

Lodging Business License Application

Please select the type of lodging license you are applying for:

☐ Bed and Breakfast

☐ Hotel/Motel

☐ Vacation Dwelling Unit(s)

Applicant Information.

Full Legal Name: _____

Address: _____

Phone Number: _____

Email Address: _____

Property Information.

Property Owner's Full Legal Name: _____

Property Owner's Address: _____

Property Parcel ID Number: _____

Current Zoning of Property: _____

Legal Description of Property: _____

Business Operation Details.

Description of Existing Property Use:

Proposed Use of Property:

Number of Rooms to be Rented: _____

Additional Information for Vacation Dwelling Units. *(Required only for Vacation Dwelling Unit licenses)*

Property Manager's Full Legal Name: _____

Property Manager's Address: _____

Property Manager's Phone Number: _____

Property Manager's Email Address: _____

See Other Side for Completion

Application Checklist.

- ☐ Copy of Minnesota State License
- ☐ License Application Fee

Fee Schedule

- Bed & Breakfast Initial Application = \$100.00
- Bed & Breakfast Renewal = \$50.00
- Hotel/Motel = \$50.00
- Vacation Dwelling Unit = \$50.00

Applicant Signature. *By signing below, I certify that the information provided is accurate and complete.*

Signature: _____ Date: _____

For City Use Only

Application Received Date: _____

Application Reviewed by Administrator/Clerk:

- ☐ Complete
- ☐ Incomplete (Missing Information Notified on _____)

City Council Decision:

- ☐ Approved
 - ☐ Denied – Reason for Denial: _____
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