

Wauwatosa Health Department

7725 W. North Ave.

Wauwatosa, WI 53213

Phone: 414-479-8939

**2019 Hotel and Pool Application**

Application Date: _____

Reason for application:	<input type="checkbox"/> New	<input type="checkbox"/> Change of Operator	<input type="checkbox"/> Other: _____
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Physical Business Location Information

Name:		
Address:		
City:	State:	Zip:
Phone number:	Cell number:	
Email address:		
Emergency contact name:	Emergency contact number:	

Corporate/Owner Information

Name:		
Address:		
City:	State:	Zip:
Phone number:	Cell number:	
Email address:		

License Types. Refer to fee schedule for license fees.

Hotel/Motel. Please check the box that applies.			
<input type="checkbox"/> 1-30 rooms	<input type="checkbox"/> 31-99 rooms	<input type="checkbox"/> 100-199 rooms	<input type="checkbox"/> 200+ rooms

Swimming Pool* (RPP). Please indicate number of each type of pool on property.			
___ Cold Soak (<72°F)	___ Exercise	___ Mobile	___ Wading
___ Combination	___ Experimental	___ Swimming	___ Whirlpool
___ Diving	___ Lap	___ Therapy	

Water Attraction* (RWI). Please indicate number of each type of attraction on property.			
___ Activity	___ Leisure River	___ Vortex	___ Zero Depth Entry
___ Interactive Play Attractions	___ Vanishing Edge	___ Wave	

Water Attraction*, with up to 2 pool slides/waterslides per basin (RWT). Please indicate number of each type of attraction on property.	
___ Water Attraction, with up to 2 pool slides/waterslides per basin	
___ Waterslide or Pool Slide, in excess of 2 per basin	
Note: This section includes any pool with a slide that is not defined as a children's slide per HFS 172.04 (8).	

License Fee: \$ _____	Make checks payable to: City of Wauwatosa Submit To: Wauwatosa Health Department 7725 W. North Ave. Wauwatosa, WI 53213
Pre-Inspection Fee: \$ _____	
Total: \$ _____	

*Department of Commerce plan approval required for new/altered/modified pools

I certify that I am familiar with and agree to comply with all state and local laws, ordinances, and regulations as required in the Wisconsin Food Code and Wauwatosa Municipal Code.

Signature: _____ Printed Name: _____ Date: _____

For office use only: <input type="checkbox"/> Approve <input type="checkbox"/> Deny
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2019 Consolidated Fee Schedule

Food Service/Restaurants		
License Type	Description	Fee
Full-service	Simple	\$380
	Moderate	\$540
	Complex	\$700
Limited Food Service	Pre-packaged	\$220
Additional Area	Additional kitchen area	\$210
Pre-Inspection	First time applicants only	\$365

Hotel/Motel		
License Type	Description	Fee
Rooming House		\$115
Hotel/Motel – Local	Per Room	\$8
Hotel/Motel - State	1-30 Rooms	\$235
	31-99 Rooms	\$315
	100-199 Rooms	\$360
	200+ Rooms	\$560

Retail Food Service		
License Type	Description	Fee
R-55	Food establishment that is not engaged in food processing	\$160
R-44	Annual food sales of less than \$25,000 and is engaged in food processing	\$190
R-33	Annual sales of at least \$25,000 and is engaged in food processing, but does not process potentially hazardous food	\$320
R-22	Annual sales of at least \$25,000 but less than \$1,000,000 and processes potentially hazardous food	\$435
R-11	Annual sales of at least \$1,000,000 and processes potentially hazardous food	\$765
Pre-Inspection	First time applicants only	\$365

Temporary Event	
License Type	Fee
Temporary Event – Restaurant	\$175
Temporary Event – Processing Retail	\$175
Temporary Event – Non-Processing Retail	\$115

Bed & Breakfast / Micro Market	
License Type	Fee
Bed & Breakfast License fee	\$225
Micro Market License fee one only	\$40
Micro Market License fee two or more (in the same building)	\$60

Pools			
License Type	Description	Frequency	Fee
Swimming Pool	Permit fee (per pool)	Annual	\$155
	Pre-inspection Fee	Once - first time applicants only	\$155
Water Attraction	Permit fee (per attraction)	Annual	\$180
	Pre-inspection Fee	Once - first time applicants only	\$180
Water Attraction – up to 2 slides	Permit Fee (per attraction)	Annual	\$255
	Pre-inspection Fee	Once - first time applicants only	\$255
Per slide in excess of 2 per basin	Permit Fee (per slide)	Annual	\$155
	Pre-inspection Fee	Once - first time applicants only	\$155

Miscellaneous		
License Type	Description	Fee
Pre-Inspection	First time applicants only	\$365
Additional area		\$210
Expedited processing fee	Includes plan review new/remodel and change of owner; Licenses requested with 3 days of establishment opening or temporary event	10% of license fee or \$5
Excessive Inspection	Escalating fee after the first compliance, re-inspection up to \$200 per inspection	\$150
Late Fee – licenses		10% of license fee or \$5
Other Inspection	Events or situations where the health department does not license but needs to inspect	\$30