City of Wisconsin Dells

Application for:

RIDING STABLE/HORSES FOR HIRE

Date Submitted: _____ **Fee $200 Plus $25 per horse**_____ Receipt No. _____

Name of Applicant: _____ Date of Birth: _____

Address of Applicant: _____

Daytime Telephone Number: (_____)_____ Email Address: _____

Applicant's Drivers License Number: _____State:_____

Name and Address of Business:_____

_____

Number of Horses:_____

Proposed hours of Operation: _____

Description of Route: (Attach map) _____

_____

_____

*Attach written permission from property owners if applicable.

Description of the manner and location in which the horses will be feed, sheltered, stabled or transported within the City:

_____

_____

Safety and Sanitation Methods: _____

_____

Printed Name of Applicant: _____

_____

Signature of Applicant

License subject to compliance with Wisconsin Dells Code Section 16.01

- ❑ Date Approved: _____ License Valid from _____, 20____ through April 30, 20____

  Conditions (if any): _____

- ❑ Date Denied: _____ Reason(s): _____

  _____

Note: Incomplete, false, or misleading information on the application form can delay the review process and/or be grounds for denial of permit or license. Rev. 03/13