



Transient Occupancy Tax Over Thirty-Day Exemption Form

In order to qualify for an over thirty day exemption, prior to occupancy, this form must be completed in full by the operator and signed by the occupant. Absent such obligatory agreement, occupant is deemed to be a transient and subject to the City's Transient Occupancy Tax for exercising occupancy for a period of thirty consecutive calendar days or less. Please complete in ink.

Room Rate: \$ _____ Check one: Daily Weekly Monthly Room Number: _____
(or attach listing if multiple rooms)

Period of Residency: m/d/yr _____ to m/d/yr _____

A. The UNDERSIGNED hereby request to be exempted from paying Transient Occupancy Tax in the amount of \$ _____ because the tenancy is for more than thirty consecutive calendar days.

B.
$$\frac{\$ \text{_____}}{\text{Daily Room Rate}} \times \frac{30}{\text{Number of Days Subject to TOT exemption}} = \frac{\$ \text{_____}}{\text{Total Rent Subject to TOT Exemption}}$$

$$\frac{\$ \text{_____}}{\text{Daily Room Rate}} \times \frac{9.5\%}{\text{TOT Rate}} = \frac{\$ \text{_____}}{\text{Daily Tax Rate}}$$

$$\frac{\$ \text{_____}}{\text{Daily Tax}} \times \frac{30}{\text{Number of Days Subject to TOT exemption}} = \frac{\$ \text{_____}}{\text{Total TOT Subject to Exemption}}$$

OCCUPANT AFFIDAVIT:

I hereby certify that I have been exempted transient occupancy tax in the amount of \$ _____. I understand that this agreement obligates me to pay rent to the hotel/motel operator for the right of exercising occupancy in excess of thirty (30) consecutive days. Although I may not exercise occupancy for a period in excess of thirty (30) consecutive days, I shall be liable to the operator for rent for the period of time agreed upon. I declare under penalty of perjury that to the best of my knowledge and belief the statements made herein are correct and true.

Signature of Occupant

Date

Telephone Number

FOR HOTEL USE ONLY

Hotel Note: Exemption is granted to occupant. This form must be signed by the occupant. Make copy and provide occupant with photocopy. Hotel must file and maintain original for minimum of three years.

Name of Hotel/Motel: _____

Name of Hotel/Motel Employee: _____