

**TRANSIENT OCCUPANCY TAX
EXEMPTION CLAIM FORM (30+ DAY'S STAY)**



CERTIFICATE NO. _____

HOTEL/MOTEL/OPERATOR NAME: _____

WARNING: Exemption begins on the 31st day of an uninterrupted period of greater than 30 days. Indicate the date of the 31st day of the occupancy and the dates exempted during this reporting period this month only.

Date of 31st day: _____
Dates exempted for this reporting period _____ through _____
\$ _____ Indicate gross rent collected that is subject to exemption for this reporting period only.

DECLARATION OF MOTEL / HOTEL GUEST

I declare, under penalty of perjury, that I have been a guest at the above- named motel/ hotel for more than 30 consecutive days.

Name of Guest (Printed)

Signature of Guest

Signature of Owner/ Operator

Dated: _____

ATTENTION MOTEL/HOTEL: *This form must accompany your monthly report to the County of Riverside in order to receive credit for the exemption. If this form is not received, you will be subject to penalty.

Riverside County
Treasurer-Tax Collector
P.O. Box 12005
Riverside, CA 92502
Attn: T.O.T.
Phone: 951-955-4219
Fax: 951-955-3923
E-mail: rtctc@rivco.org

Rev. October 18, 2016

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