



FOR INTERNAL USE ONLY
DATE RECEIVED: _____
SUBMITTED TO FINANCE DIRECTOR: _____
CITY HOT REGISTRATION NUMBER:

HOTEL OCCUPANCY TAX (HOT) REGISTRATION

Pursuant to Town of Laguna Vista **Ordinance 2022-03** every person engaging or about to engage in business as a lodging provider in the Town shall immediately register with the City Secretary on a form provided by said official. Persons engaged in such business must so register no later than thirty (30) days after the date that this Ordinance becomes effective. Such registration shall set forth the name under which such person transacts business or intends to transact business, the location of his place(s) of business and such other information which would facilitate the administration of the tax as prescribed by the City Secretary. The registration shall be signed by the owner if a natural person; in case of ownership by an association or partnership, by a member or partner; in case of ownership by a corporation, by an officer. For each registrant, the Town shall charge a one-time registration fee of \$50.00. The City Secretary shall, after such registration, issue a certificate of authority to each lodging provider to collect the tax from the occupant. A separate registration shall be required for each place of business of a lodging provider and shall be assigned a unique registration number, but a registrant will not be charged an additional registration fee for new places of business after the first such registered location. Each certificate shall state the name and location of the business to which it is applicable. Any advertising or promotion of a property on which one or more guest rooms are located shall prominently display its registration number.

Business Name: _____ Tax ID _____

Business Address: _____

Type: Hotel Motel Condo B&B Other _____

OWNER INFORMATION

Owner Name: _____

Owner Phone: _____

Owner Email: _____

Owner Mailing Address: _____

CONTACT INFORMATION (IF DIFFERENT FROM ABOVE):

Contact Name: _____

Contact Phone: _____

Contact Email: _____

Contact Mailing Address: _____

Signature: _____

Date: _____