



SAN BERNARDINO COUNTY
TAX COLLECTOR

268 West Hospitality Lane, First Floor, San Bernardino, CA 92415

Application for TOT Certificate

Registration pursuant to County Code §14.0203 - Uniform Transient Occupancy Tax (TOT)

1. OWNER \_\_\_\_\_

2. TYPE OF RENTAL:

[ ] BUSINESS

[ ] PRIVATE RENTAL HOME

3. BUSINESS NAME (if applicable) \_\_\_\_\_

4. RENTAL ADDRESS \_\_\_\_\_

5. MAILING ADDRESS \_\_\_\_\_

6. PHONE NUMBER \_\_\_\_\_

7. HOW LONG HAVE YOU OWNED OR OPERATED THIS BUSINESS? \_\_\_\_\_

8. TYPE OF ORGANIZATION:

[ ] INDIVIDUAL

[ ] PARTNERSHIP

[ ] CORPORATION

If CORPORATION, list State of Incorporation & Articles # \_\_\_\_\_

9. NAMES OF PARTNERS OR CORPORATION OFFICERS:

NAME TITLE ADDRESS

NAME TITLE ADDRESS

NAME TITLE ADDRESS

10. NUMBER OF OCCUPANCY UNITS \_\_\_\_\_

11. IF OWNER DOES NOT OPERATE THE BUSINESS, PLEASE STATE NAME, ADDRESS, AND TELEPHONE NUMBER OF OPERATOR OR MANAGING AGENT WHO OPERATES THE BUSINESS.

\_\_\_\_\_

\_\_\_\_\_

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

SIGNED \_\_\_\_\_