

CITY OF WEST HOLLYWOOD

Application for Transient Occupancy Registration Certificate

For Office Use Only	

REGISTRATION INFORMATION	
Registration Type	Effective Date
New Registration	
Account Update	Existing Certificate Number
Certificate Type	
Hotel/Motel/B&B Vacation R	ental Other - Explain:
PROPERTY INFORMATION	Mailing Address
Property Name (DBA)	Number of rooms
Address	City, State, Zip Code
Phone Number	Fax Number
Operations Contact Name	Ops. Contact Email
Financial Contact Name	Fin. Contact Email
OPERATOR INFORMATION	Mailing Address
Operator Name	Contact Name
Address	City, State, Zip Code
Phone Number	Fax Number
Email Address	
OWNER INFORMATION	Mailing Address
Same Information as Operator	
Owner Name	Contact Name
Address	City, State, Zip Code
Phone Number	Email Address
Ordinance of the City of West Hollywood by registering wit ax to the Tax Administrator. This certificate does not aut	that the person named on the face hereof has fulfilled the requirements of the Uniform Transient Occupancy To the Tax Administrator for the purpose of collecting from transients the transient occupancy tax and remitting said horize any person to conduct any unlawful business or to conduct any lawful business in any unlawful manner, no cable laws, including but not limited to those requiring a permit from any board, commission, department or office
Name & Title (Print)	
Signature	Date