

Name of Hotel:

City of West Hollywood

Revenue Management Division
8300 Santa Monica Boulevard ♦ West Hollywood ♦ CA 90069

TRANSIENT OCCUPANCY TAX

TYPE "B" EXEMPTION CERTIFICATE FOR GOVERNMENTAL AGENCIES

This form is to be completed by a representative or employee of a governmental agency requesting an exemption from West Hollywood's Transient Occupancy Tax under Sec. 3.32.040, Exemptions of the West Hollywood Transient Occupancy Tax Code. The hotel operator, as defined under Sec. 3.32.020, Definitions, must retain this completed form and supporting documents for three years.

| Address: | | | Mart 11-11 | 7: 00000 |
|--|-------------------------|--|-----------------------|------------|
| Number & Street | | | West Hollywood, CA | Zip: 90069 |
| Dates of Occupancy: | | | Amount Paid for Room: | |
| Check In: | Check Out: | | | |
| Employee Name: | | | | |
| First Name: | | Last Name: | | |
| Employee Address: | | | | |
| Employee Telephone #: | | Drivers License: State | e Number | |
| Type of Government: | Federal State of | f: Local Gov | ernment: | |
| Governmental Agency: Name of Agency | | | | |
| Home Office Location: (Address) | | (City) | (State) (Zip) | |
| Agency Telephone # | | | | |
| the foregoing facts and s Executed at: (City) Signature: | statements are true and | , (State) | | |
| Signature: | | Date. | | _ |
| | | he person presenting it submits satisfact etter, or Identification Card). A Separate | | |
| TO BE COMPLETED BY HOTEL OPERATOR/STAFF This exemption is not valid unless the occupant's Government Agency Calling Card, Agency Letter, or ID Card is attached | | | | |
| VERIFIED BY: | | | | |
| Print Hotel Employ | vee's Name | Hotel Employee's Signature | | Date |
| | | | | |