

Ben Anderson Okaloosa County Tax Collector Tourist Development Tax Registration Application

Applicant Information Please fill this form out completely, missing information may delay processing.									
(The information in this section pertains to the person or company responsible for collecting and remitting tourist development taxes)									
Individual/Company Name Phone									
Primary Contact	Name						Alter	rnate Phone	
Email								Fax	
Address Line 1					Addr	ess Line 2			
City			State					Zip Code	
FL DOR Sales Ta	x No:			SSN/F	EID #				·
(This will be the prim	ary address f	or all correspon	dence regar	ding your t	tourist de	evelopment ta	x accoun	t)	
Business Own	Business Owners, Officers, Partners, Members, or Trustees								
Name & Title		SSN/FEID	Maili	ng Addre	ess			Phone & E-r	nail

Rental Property Information For multiple properties, please attach additional sheet.							
(Information in this section pertains to the actual rental property)							
Business/Rental Property Name							
Real Estate Owner(s) Name							
Real Estate Parcel ID Number							
Number of Unit(s)							
Physical Address		Unit #					
City	State	Zip Code					
Type of Rental							

Condominium	🗆 Condo-Hotel	□Single Family Dwelling	Beginning Date of Rental Activity:
\Box Apartment	\Box Hotel	□Bed & Breakfast	
□ Motel	🗆 Mobile Home	□Property Management	Select Filing Preference:
□ Campground	□ Timeshare	□ Other:	\Box Monthly \Box Quarterly

Applicant Declaration (Signature required to process application)

Please note that any person who is required to collect, truthfully account for, and pay any taxes and willfully fails to do so shall be liable for penalties under the provisions of Section 213.29 Florida Statutes(F.S.). All information provided by the applicant is confidential as provided in Section 213.053 F.S. and is not subject to Florida Public Records Law, Section 119.07 F.S. *By providing an email address above, you consent to electronic communication via e-mail*. Under penalty of perjury, I declare that I have read the foregoing application and the facts stated in it are true.

Applicant Signature:		Printed Name:	Date:
	To Digitally Sign, Please Type Full Name		

Please save and e-mail to <u>TouristTax@OkaloosaTax.com</u>, fax (850) 651-7690, or mail to: Okaloosa County Tax Collector *701 E John Sims Pkwy* Niceville, FL 32578

For more information on the Tourist Development Tax, please visit our website at <u>www.OkaloosaTax.com</u> You may contact Joshua Allen, Director of Business Collections at (850) 651-7310 or e-mail TouristTax@OkaloosaTax.com

Rental Property Information								
(Information in this section pertains to the actual rental property)								
Business/Rental Prope	rty Name	e						
Real Estate Owner(s) N	ame							
Real Estate Parcel ID N	umber							
Number of Unit(s)								
Physical Address					Unit	#		
City State			e Zip Code					
Type of Rental								
Condominium Condo		ndo-H	-Hotel		g Be	ginning Date of Rental Activity:		

\Box Condominium	🗆 Condo-Hotel	\Box Single Family Dwelling	Beginning Date of Rental Activity:
\Box Apartment	\Box Hotel	□Bed & Breakfast	
\Box Motel	🗆 Mobile Home	□Property Management	FL DOR Sales Tax No:
□Campground	🗆 Timeshare	□Other:	

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(Information in this section pertains to the actual rental property)							
Business/Rental Property Name							
Real Estate Owner(s) Na	ame						
Real Estate Parcel ID Nu	ımber						
Number of Unit(s)							
Physical Address						Unit #	
City State		State	e Zip Code		Zip Code		
Type of Rental							
\Box Condominium \Box Condo-		ondo-Ho	-Hotel		Family Dwelling	Beginning Date of Rental Activity:	
□ Apartment □ Hotel			□Bed & Breakfast				
□ Motel □ Mobile Home		□Property Management		FL DOR Sales Tax No:			

□0ther:_____

 \Box Campground

□ Timeshare

Rental Property Information							
(Information in this section pertains to the actual rental property)							
Business/Rental Property Name							
Real Estate Owner(s) N	ame						
Real Estate Parcel ID N	umber						
Number of Unit(s)							
Physical Address			Unit #			nit #	
City Stat		State	ę		Zip Code		
Type of Rental							
□ Condominium □ Condo-		ondo-Ho	-Hotel		Family Dwelling	Beginning Date of Rental Activity:	
\Box Apartment \Box Hotel		otel			Breakfast		
□ Motel □ Mobile		obile Ho	Home \Box Prop		rty Management	FL DOR Sales Tax No:	
□Campground □ Timesh		meshar	-		·		