

**OTTAWA COUNTY AUDITOR LODGING TAX REGISTRATION FORM****For Transient Occupancy Registration Certificate Application, Section 5739.024 O.R.C.**

The following information is necessary to register a lodging establishment within the OTTAWA COUNTY, Ohio for the purpose of obtaining a "Transient Occupancy Registration Certificate."

Name of Lodging Establishment		Telephone	
Address			
Name of Establishment Owner		Telephone	
Address of Owner			
Name of Establishment Operator (If different than Owner)		Telephone	
Address of Operator			
Type of Establishment (check all that apply) <div style="display: flex; justify-content: space-between; padding: 5px;"><input type="checkbox"/> Hotel<input type="checkbox"/> Motel<input type="checkbox"/> Bed & Breakfast<input type="checkbox"/> Cottage<input type="checkbox"/> Cabins<input type="checkbox"/> Condominium<input type="checkbox"/> Vacation Home<input type="checkbox"/> Other: _____</div>			
Total Number of Rooms/Units Available for Transient Guests			
Lodging Tax Contact Person		Telephone	Email
Send all Lodging Tax Correspondence to <div style="display: flex; justify-content: space-between; padding: 5px;"><u>Name</u><u>Address</u><u>Telephone</u></div>			
Please Indicate which quarters you anticipate needing to submit a return		<div style="display: flex; flex-wrap: wrap; padding: 5px;"><div style="width: 50%;"><input type="checkbox"/> 1st Quarter – January 1-March 31</div><div style="width: 50%;"><input type="checkbox"/> 2nd Quarter – April 1-June 30</div><div style="width: 50%;"><input type="checkbox"/> 3rd Quarter – July 1-September 30</div><div style="width: 50%;"><input type="checkbox"/> 4th Quarter – October 1-December 31</div></div>	
Name of Applicant (Print)			
Signature		Date	
For Office Use Only			
Certificate Number		Taxing District	
Date of Issue			