



TRANSIENT OCCUPANCY TAX APPLICATION FOR CERTIFICATE REGISTRATION

CITY OF GOLETA
Finance Department

(Title 3 of Chapter 6)

130 Cremona Drive, Suite B • Goleta, CA 93117
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REGISTRATION INFORMATION

REGISTRATION TYPE

New Registration Account Update - Existing Certificate Number :

CERTIFICATE TYPE

Hotel/Motel Short-Term Vacation Rental Owner-Occupied Vacation Rental

HOTEL / VACATION RENTAL INFORMATION

COMPANY NAME (If Applicable)			CONTACT PERSON & TITLE
ADDRESS			PHONE
CITY	STATE	ZIP	E-MAIL
WEBSITE	DATE OF OPENING	NUMBER OF RENTAL UNITS	

OWNER INFORMATION

COMPANY NAME (If Applicable)			CONTACT PERSON & TITLE
ADDRESS			PHONE
CITY	STATE	ZIP	E-MAIL

TYPE OF ORGANIZATION

Sole Proprietorship Partnership Corporation Other (Specify):

MANAGEMENT COMPANY INFORMATION (If Applicable)

COMPANY NAME			CONTACT PERSON & TITLE
ADDRESS			PHONE
CITY	STATE	ZIP	E-MAIL

I (we) certify that the above is true and correct, under penalty of perjury. I (we) acknowledge that the transient occupancy taxes (currently twelve percent of the rent charged) and TBID Assessments are trust funds due the City of Goleta. All taxes collected will be kept in trust and not commingled with other monies. I (we) are aware the Tax Collector has established that rents will be reported, and taxes remitted, to the Tax Collector on a monthly basis (due postmarked by the last day of the month after collection). Operators are responsible for payment of the taxes, any late penalties, and interest. Also, once the Certificate Number is issued, it shall be listed on all TOT Remittance Returns.

PRINT NAME	SIGNATURE
TITLE	DATE

FOR OFFICE USE ONLY	
FINANCE DIRECTOR APPROVAL:	DATE: