



**TREASURER/TAX COLLECTOR
JUSTIN BIRTWHISTLE**

**TRANSIENT OCCUPANCY TAX
REGISTRATION APPLICATION**

Owner's Name: _____

Name of Lodging Establishment: _____

Name of Operator/Agent (if different): _____

Mailing Address: _____
Street City State Zip

Address of Lodge (list each): _____
(attach sheet if necessary) _____

Telephone: () _____ Total Number of Lodging Units: _____

Email: _____

Former Name (if different): _____

Date Lodging Operation Began: _____

Signature of Applicant: _____

Print Name: _____

Date Signed: _____

Please return this application to:

**Tuolumne County Tax Collector
PO BOX 3248
Sonora, CA 95370
Or Email: TOT@co.tuolumne.ca.us**

For more information about Tuolumne County Transient Occupancy Tax and Tuolumne County Ordinance Code Chapter 3.32 please visit our website at www.tuolumnecounty.ca.gov/tax and click Transient Occupancy Tax.

TTC USE ONLY

Cert # _____ Cubs # _____

APN # _____

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