

**Exempt Amount \$** 

## REQUEST FOR EXEMPTION FROM PAYMENT OF TRANSIENT OCCUPANCY TAXES FOR OFFICIAL FEDERAL GOVERNMENTAL BUSINESS

## **Prequalification Form**

Individual or Group Name:	
Official name of Federal Government Agency:	
Federal ID#: Fed ID verified by Hotel Representative (initial)	
Hotel/Motel:	
Mailing Address of Hotel/Motel:	
Hotel/Motel fax number:	
Date(s) of Reservation: Num	ber of Rooms Reserved:
Number of Room Nights: Roon	n Rate per Night:
Name of Hotel/Motel Representative:	
Telephone Number of Representative:	
Description of official federal business to be conducted. Agenda/itinerary must be attached.	
FOR CITY US PREQUALIFICATION FO	
Approved	
Denied	
Date:revenue@cityof slt.us	City of South Lake Tahoe Finance Dept/Revenue Division PHONE: (530) 542-6012
SLTCC § 3.50.040 "Transient occupancy tax shall be charged to transient lodging facility except employees of the (Ord. 935 § 1; Ord.980 § 1. Code 1997 §)"	

Faxed to Hotel

**TOT** reported