



**CITY OF GLENDALE, CALIFORNIA**

Finance

141 N. Glendale Ave., Suite 346

Glendale, CA 91206-4975

Tel. (818) 548-2085 Fax (818) 956-3286

glendaleca.gov

**Application for Transient Occupancy  
Registration Certificate**

|                            |       |
|----------------------------|-------|
| <i>For Office Use Only</i> |       |
| Certificate No.:           | _____ |
| Date Processed:            | _____ |

|                                     |                                           |                                         |                                           |                                       |
|-------------------------------------|-------------------------------------------|-----------------------------------------|-------------------------------------------|---------------------------------------|
| <b>REGISTRATION<br/>INFORMATION</b> | REGISTRATION TYPE                         |                                         | CERTIFICATE TYPE                          |                                       |
|                                     | <input type="checkbox"/> New Registration | <input type="checkbox"/> Account Update | <input type="checkbox"/> Hotel/Motel/etc. | <input type="checkbox"/> Other: _____ |
| <b>PROPERTY<br/>INFORMATION</b>     | NAME OF HOTEL/MOTEL/ETC.                  |                                         |                                           |                                       |
|                                     | ADDRESS                                   |                                         |                                           | SUITE #                               |
|                                     | CITY                                      |                                         | STATE                                     | ZIP CODE                              |
|                                     | NUMBER OF ROOMS                           |                                         | WEBSITE ADDRESS                           |                                       |
|                                     | PHONE NO.<br>(    )                       |                                         | ALT. PHONE NO.<br>(    )                  |                                       |
|                                     | MAILING ADDRESS (if different from above) |                                         |                                           | APT./SUITE #                          |
|                                     | CITY                                      |                                         | STATE                                     | ZIP CODE                              |
|                                     |                                           |                                         |                                           |                                       |
| <b>OPERATOR<br/>INFORMATION</b>     | OPERATOR NAME                             |                                         |                                           |                                       |
|                                     | ADDRESS                                   |                                         |                                           | SUITE #                               |
|                                     | CITY                                      |                                         | STATE                                     | ZIP CODE                              |
|                                     | PHONE NO.<br>(    )                       |                                         | ALT. PHONE NO.<br>(    )                  |                                       |
|                                     | EMAIL ADDRESS                             |                                         |                                           |                                       |
|                                     |                                           |                                         |                                           |                                       |
| <b>OWNER<br/>INFORMATION</b>        | OWNER NAME                                |                                         |                                           |                                       |
|                                     | ADDRESS                                   |                                         |                                           | SUITE #                               |
|                                     | CITY                                      |                                         | STATE                                     | ZIP CODE                              |
|                                     | PHONE NO.<br>(    )                       |                                         | ALT. PHONE NO.<br>(    )                  |                                       |
|                                     | EMAIL ADDRESS                             |                                         |                                           |                                       |
|                                     |                                           |                                         |                                           |                                       |

This Transient Occupancy Registration Certificate signifies that the person named on the face hereof has fulfilled the requirements of the Transient Occupancy Tax Ordinance of the City of Glendale by registering with the Tax Administrator for the purpose of collecting from transients the transient occupancy tax and remitting said tax to the Tax Administrator. This certificate does not authorize any person to conduct any unlawful business or to conduct any lawful business any unlawful manner, nor to operate a hotel without strictly complying with all applicable laws, including but not limited to those requiring a permit from any board, commission, department or office of this city. This certificate does not constitute a permit.

|            |       |
|------------|-------|
| PRINT NAME | TITLE |
| SIGNATURE  | DATE  |