

Department of Finance

Chad Rinde
Director



County of Sacramento

Divisions

Auditor-Controller
Consolidated Utilities Billing &
Services
Investments
Revenue Recovery
Tax Collection & Licensing
Treasury

TRANSIENT OCCUPANCY TAX EXEMPTION CERTIFICATE

COUNTY OF SACRAMENTO

SACRAMENTO COUNTY CODE SECTION 3.08.040

HOTEL/BUSINESS NAME: _____

DATES OF STAY: _____

ENTITY TYPE:

Government Agency Name _____

United States Government

State of _____

County of _____

City of _____

AGENCY CONTACT:

Name _____ Phone No.: _____

Address _____ Room # _____

City _____ State _____ Zip Code _____

GUEST NAME: _____

I declare under penalty of perjury that I am an employee of the above named government agency that is directly renting a room(s) at the hotel/motel listed above and it is exempt from payment of the Transit Occupancy Tax. Verification of exempt status is permitted.

Signed: _____ Date: _____

As an employee of the above hotel/motel/inn, I declare under penalty of perjury that I have verified the identification of the above guest and confirm that he is an employee of above named government.

Signed: _____ Date: _____