



**CITY OF WESTERVILLE
INCOME TAX DIVISION
CERTIFICATE OF EXEMPTION
HOTEL/MOTEL
EXCISE TAX**

DATE _____

NAME OF HOTEL, APARTMENT HOTEL OR LODGING HOUSE: _____

HOTEL ADDRESS: _____

DATE OF OCCUPANCY: _____

This is to certify that the undersigned hereby claims exemption from the hotel/motel excise tax, imposed by CHAPTER 195, City of Westerville Codes.

Purchaser must state statutory reason for claim exemption or exception:

STATE STATUTORY REASON FOR EXEMPTION: _____

OCCUPANTS NAME: _____

OCCUPANTS COMPANY NAME: _____

OCCUPANTS COMPANY ADDRESS: _____

PREPARED BY (HOTEL EMPLOYEE): _____

TITLE (HOTEL EMPLOYEE): _____

COMPANY'S FED ID # _____ **DATE** _____

HOTEL VENDOR'S LICENSE, IF ANY: _____