

COUNTY OF PLACER
ADMINISTRATIVE SERVICES DEPARTMENT
REVENUE SERVICES DIVISION
11582 B Avenue, Auburn, CA 95603
Ph: (530) 889-7786 Fax: (530) 889-6944

REQUEST TO CLOSE TRANSIENT OCCUPANCY TAX CERTIFICATE

Pursuant to the Transient Occupancy Tax Code, Sec 4.16.060 B, the Registration Certificate shall be returned to the Tax Administrator for cancellation whenever an operator to whom a certificate has been issued ceases to act in the capacity of an operator.

Name of Certificate Holder _____ Owner: _____ Agent: _____
Address of Rental _____ Certificate Number: _____
City, State and Zip _____ Account Number: _____
Assessor's Parcel Number (APN): _____

Please cancel the certificate number _____.

Please check all that apply:

- We are no longer renting this property for 30 days or less.
- We are no longer acting as rental management for this rental property. End service date: _____.
- We have sold this property. Sale date: _____.
- We have contracted with a rental management company. Name of company: _____.
- Other: _____

Is the certificate enclosed? _____ Yes _____ No

If the certificate is not enclosed, please provide the reason below. You must provide written verification that a diligent effort to locate the certificate was performed and that it was unsuccessful.

I certify that the information provided on this request to close the certificate is true and correct and that I have read and understand the Transient Occupancy Tax Code - available in booklet form by request or on the Placer County Web Site <http://www.placer.ca.gov/Departments/Admin/Revenue.aspx>.

Authorized Signature

Date

Print Name

Title