

COUNTY OF VOLUSIA
TOURIST DEVELOPMENT TAX
123 WEST INDIANA AVE., ROOM 103
DELAND, FL 32720-4602
(386) 736-5938 (386) 822-5729 FAX

FOUR DIGIT COUNTY
ACCOUNT #

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****CONFIDENTIAL****

REGISTRATION FORM
(PLEASE TYPE OR PRINT ALL INFORMATION & SIGN)

INDIVIDUAL OWNERS

INDIVIDUAL OWNER'S NAME		TELEPHONE NO.	
MAILING ADDRESS			
CITY	STATE	ZIP	COUNTY

*RENTAL LOCATION ADDRESS			
CITY			
COMPLEX NAME (IF APPLICABLE)			

RENTAL LOCATION ADDRESS			
CITY			
COMPLEX NAME (IF APPLICABLE)			

RENTAL LOCATION ADDRESS			
CITY			
COMPLEX NAME (IF APPLICABLE)			

FEDERAL EMPLOYER I.D. NO. (FEIN)			
SOCIAL SECURITY #			
FLORIDA SALES TAX #			

Date Business Activity Began (MM/DD/YY) ___/___/___

TYPE OF RENTAL (PLEASE CHECK ONE)

- ___ CONDOMINIUM - INDIVIDUAL OWNER
___ SINGLE FAMILY RESIDENCE/APARTMENT
___ MOBILE HOME/TRAILER PARK

NUMBER OF RENTALS _____

BANK INFORMATION

BANK NAME _____
ROUTING# _____
ACCOUNT# _____

I hereby acknowledge that the information contained in this form is true and correct and that it is my responsibility to contact the County of Volusia, Finance Department in writing immediately if any of this information should changes.

APPLICANT'S SIGNATURE _____

TITLE _____ DATE _____

***Applicant's social security number or Federal Employer Identification Number is collected pursuant to F.S. 212.18(3)(a).**

FOR OFFICE USE ONLY	
REAL ESTATE PARCEL#	_____
RE ALTERNATE KEY #	_____
TANGIBLE PARCEL #	_____
TPP ALTERNATE KEY #	_____
BUSINESS TAX RECEIPT #	_____
FLORIDA CORPORATION #	_____

***If the property you are renting is located within the city limits, please contact your local City Zoning Office to make sure the property is zoned for short term rentals.**

***If the property you are renting is not located within the city limits, please contact the County Zoning Office at (386) 943-7059 to make sure the property is zoned for short term rentals.**