

**TRANSIENT OCCUPANCY TAX  
EXEMPTION CLAIM FORM FOR  
GOVERNMENTAL AGENCY OCCUPANTS**



CERTIFICATE NO. \_\_\_\_\_

HOTEL/MOTEL/OPERATOR NAME: \_\_\_\_\_

The undersigned claims exemption from paying the 10% transient occupancy on  
\$ \_\_\_\_\_ gross room rental charged for the period shown below

\_\_\_\_\_ through \_\_\_\_\_  
(month) (day) (year) (month) (day) (year)

**Based on Section 4 of Ordinance:**

No tax shall be imposed on any officer or employee of a foreign government who is exempt by reason of express provision of federal law or international treaty.

**Notice to Operators:** Operators of hotels, etc., should not accept this claim for exemption unless the person presenting it shows satisfactory credentials. A separate claim form is required for each occupancy and for each representative. **RETAIN THIS FOR YOUR FILES TO SUBSTANTIATE.**

I declare under penalty of perjury that to the best of my knowledge the foregoing is true, correct, and complete.

\_\_\_\_\_  
Name of Foreign Government

\_\_\_\_\_  
Address of Home Office

\_\_\_\_\_  
Signature of Representative

\_\_\_\_\_  
Date

Riverside County  
Treasurer-Tax  
Collector  
P.O. Box 12005  
Riverside, CA 92502  
Attn: T.O.T.

Phone: 951-955-4219  
Fax: 951-955-3923  
E-mail:  
ttc@rivcotte.org