



COUNTY OF RIVERSIDE, STATE OF CALIFORNIA

**MATTHEW JENNINGS
TREASURER-TAX COLLECTOR**

Riverside County Treasurer-Tax Collector
Attn: TOT Desk
P.O. BOX 12005
RIVERSIDE, CA 92502-2205
(951) 955-0799
Email: rcttctot@rivco.org

TRANSIENT OCCUPANCY TAX REGISTRATION FORM
ORDINANCE NO. 495

DATE: _____

CERTIFICATE NO. _____
(To be assigned by the Treasurer-Tax Collector)

OPERATOR (person preparing all TOT documents):

- 1. Operator Name: _____ Title: _____
- 2. Operator Mailing Address: _____
- 3. Operator Phone: _____ *Email Address: _____
*Must be included for courtesy billing reminders.

BUSINESS (name of business whom Operator works for):

- 4. Not Applicable
 - 5. Business Name: _____
 - 6. Business Type: Individual Corporation Partnership Other _____
 - 7. Business Mailing Address: _____
 - 8. Business Phone: _____
 - 9. Names of Partners or Corporation Officers:
- | | | |
|--------|---------|-----------|
| (Name) | (Title) | (Address) |
| (Name) | (Title) | (Address) |

OWNER (person/entity who owns the rental property):

- 10. Same Information as Operator
- 11. Owner Name: _____
- 12. Owner Mailing Address: _____
- 13. Owner Phone: _____

RENTAL PROPERTY:

- 14. Parcel Identification Number (PIN) of rental unit: _____
- 15. Unit Type: Short Term Rental

Hotel/Motel

- 16. First date renting to transient: _____
- 17. Number of units available to rent: _____
Example: If the rental is 1 house, Units=1; If rental is a 10-room hotel, units=10
- 18. Seasonal: No

Yes

- 19. Rental Address: _____

SIGNATURE: _____ TITLE: _____

RETURN THIS REGISTRATION FORM TO THE ADDRESS LISTED ON THE TOP OF THIS FORM

For Questions Regarding the Transient Occupancy Registration,
Contact the Riverside County Treasurer-Tax Collector's Office at (951) 955-0799 or via email at RCTTCTOT@RIVCO.ORG

FOR OFFICE USE ONLY:	TWC BOUNDARY			TLMA PERMIT#	
	GPS BOUNDARY				