

COUNTY OF JEFFERSON
HOTEL ROOM TAX
INDIVIDUAL EXEMPTION APPLICATION

AN EMPLOYEE OF A COUNTY, TOWNSHIP, BOROUGH OR OTHER MUNICIPALITY ON OFFICIAL BUSINESS IS NOT EXEMPT FROM THIS TAX AND IS NOT AUTHORIZED TO COMPLETE THIS APPLICATION.

TO THE JEFFERSON COUNTY TREASURER:

The undersigned Applicant hereby applies for a Hotel Room Tax Exemption for his or her stay at this Establishment for the following reason(s) (check where appropriate):

- () 1. The Applicant will stay for a rental period of thirty (30) consecutive, complete days of uninterrupted occupancy.

IN ALL CASES in Items 2 through 7, in order to qualify for the exemption, the invoice must be billed to and paid by the body or agency with whom the Applicant is associated. If the Applicant pays the invoice and is then to be reimbursed by the body or agency with whom he or she is associated, THE APPLICANT IS NOT EXEMPT FROM the Jefferson County Hotel Tax.

- () 2. The Applicant is an employee of an agency or department of the United States of America and is on official government business and the invoice is being sent to and will be paid by such agency or department.
- () 3. The Applicant is an employee of the Commonwealth of Pennsylvania and is on official Commonwealth business, and the invoice is to being sent to and will be paid by the Commonwealth.
- () 4. The Applicant is a member of a Federal Credit Union under the provisions of the Federal Credit Union Act and is on official union business, and the invoice is being sent to and will be paid by such Union.
- () 5. The Applicant is a member of the Commonwealth Credit Union incorporated under the Credit Union Act and is on official union business, and the invoice is being sent to and will be paid by such Union.
- () 6. The Applicant is a member of the Co-operative Agriculture Association organized under the Co-Operative Agriculture Association Corporate Net Income Tax Act and is on official association business, and the invoice is being sent to and will be paid by such Association.
- () 7. The Applicant is an employee of Electric Cooperative Corporations organized under the Electric Cooperation Act and is on official corporate business, and the invoice is being sent to and will be paid by such Corporation .
- () 8. The Applicant is an ambassador, minister and or consular officer of a foreign government and the Applicant has a numbered identification card issued by the Pennsylvania Department of Revenue.
- () 9. The Applicant has been exempted from the tax by an exemption issued by the Pennsylvania Department of Revenue.

The undersigned Applicant hereby swears and affirms that the undersigned Applicant qualifies for the above indicated exemption(s). The undersigned understands that false statements herein made are subject to the penalties of 18 Pa. C.S.A. § 4904, relating to unsworn falsification to authorities.

Name of Applicant (Print) _____

Street _____ City _____ State _____ Zip _____

Applicant's Signature _____ Applicant's Title _____

Date _____

I have examined the documentation tendered by the Applicant and have found such documentation to support the exemption claimed.

Name of Establishment

By _____
Title

The Establishment shall maintain records to support and identify all exempt occupancies.

This form may be duplicated.

THIS APPLICATION IS VOID UNLESS COMPLETE INFORMATION IS SUPPLIED.