

City of Tucker

Finance Department

1975 Lakeside Parkway Ste. 350 • Tucker, GA • 30084
licenses@tuckerga.gov • www.tuckerga.gov



Hotel/Motel Excise Registration Application

Note: The information provided on this form will be used to establish an account or to update an existing account. Monthly excise tax reporting forms will be generated from this file.

Business Name: _____ Account Number: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Telephone No.:() _____ Fax.:() _____

Website: _____

Manager's Name: _____ Email: _____

Mailing Name: _____ **ATTN:** _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Ownership

Type of Ownership: (check one below)

Single Owner

Partnership

Corporation

Corporation Name: _____

Date Incorporated: _____ City & State where Incorporated: _____

Owner's Name: _____

Owner's Address: _____

City: _____ State: _____ Zip: _____

Room Rental Information

Number of rooms available at the location shown above: _____ Average Daily Rate: \$ _____

Weekly Rate (range) \$ _____ to \$ _____ Monthly Rate (range) \$ _____ to \$ _____

The undersigned certifies to the best of their knowledge that this information is true and correct.

Print Name of Preparer

Title

Preparer email: _____

Phone: _____

Signed: _____

Date: _____