



Julie A. White
PLUMAS COUNTY TREASURER - TAX COLLECTOR - COLLECTIONS ADMINISTRATION

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Kelsey Hostetter, Assistant Treasurer-Tax Collector
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UNIFORM TRANSIENT OCCUPANCY TAX (TOT) - REGISTRATION APPLICATION

Pursuant to Plumas County Code Title 3, Chapter 4

PROPERTY INFORMATION (PART A)

Assessor's Parcel Number:	Lodging Name:	
Property Address:		
City:	State:	Zip Code:
Type: <input type="checkbox"/> Hotel <input type="checkbox"/> Motel <input type="checkbox"/> Inn <input type="checkbox"/> Vacation Home <input type="checkbox"/> Room <input type="checkbox"/> Bed & Breakfast <input type="checkbox"/> Cottage		
<input type="checkbox"/> Music Festival <input type="checkbox"/> Campground <input type="checkbox"/> RV Park <input type="checkbox"/> Resort <input type="checkbox"/> Cabin		
Number of Occupancy Units:		Date Rental(s) Began:
On Site Manager? <input type="checkbox"/> Yes <input type="checkbox"/> No Manager Name:		
Manager Telephone:		Manager Cell Phone:
Manager Email:		

PROPERTY OWNER INFORMATION (PART B)

Name(s) of Owner(s):			
AKA(s)/DBA(s):			
Type of Ownership: <input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Other: _____			
Owners Mailing Address:			
City:	State:	Zip Code:	Country:
Telephone:		Cell Phone:	
Email:		Website Address:	

OPERATOR INFORMATION (MANAGER) (PART C)

Name(s) of Operator/Manager(s):			
AKA(s)/DBA(s):			
Operators Mailing Address:			
City:	State:	Zip Code:	Country:
Operators Physical Address/Location:			
Contact Name:			
Telephone:		Cell Phone:	
Email:		Website Address:	

RENTAL ADVERTISING INFORMATION (PART D)

Website URL:			
<input type="checkbox"/> Airbnb <input type="checkbox"/> VRBO <input type="checkbox"/> FlipKey <input type="checkbox"/> HomeAway <input type="checkbox"/> Other <input type="checkbox"/> Other			

By signing this application form I certify under penalty of perjury that all statements are true and correct and I agree to comply with all requirements of the Plumas County Code Title 3, Chapter 4.

Executed this _____ day of _____, 20

Signature

Printed Name of Operator