



State of Oregon Lodging Tax Registration

FOR OFFICE USE ONLY	
Date Received	
Business Identification Number (BIN)	

• Print or type all information.

Business Name / Owner (including DBAs)	Federal Employer Identification Number (FEIN)
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Mailing Address	City	State	ZIP Code	County
Physical Site Address of rental property (if multiple, see page 2)	City	State	ZIP Code	Business Telephone Number ()
Contact Person	Telephone Number ()	Web Address		Date You Began Operating Your Rental

Has a previous owner ever registered for or paid Oregon state lodging tax for this facility? If yes, list previous owner: _____ Previous Owner's Name and Address (if applicable)

Type of Organization	Type of Accommodation (please check all that apply) <i>If you are responsible for multiple vacation rental properties, you must provide a listing of each property and its physical address (see page 2)</i>		
<input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> LLC <input type="checkbox"/> Government	<input type="checkbox"/> Bed & Breakfast—Number of units: _____ <input type="checkbox"/> Cabin—Number of units: _____ <input type="checkbox"/> Campground—Number of units: _____ <input type="checkbox"/> Condominium—Number of units: _____ <input type="checkbox"/> Duplex—Number of units: _____ <input type="checkbox"/> Guest Ranch—Number of units: _____ <input type="checkbox"/> Hostel—Number of units: _____ <input type="checkbox"/> Hotel—Number of units: _____	<input type="checkbox"/> Houseboat—Number of units: _____ <input type="checkbox"/> Inn—Number of units: _____ <input type="checkbox"/> Lodge—Number of units: _____ <input type="checkbox"/> Motel—Number of units: _____ <input type="checkbox"/> RV Site—Number of units: _____ <input type="checkbox"/> Townhome—Number of units: _____ <input type="checkbox"/> Vacation Home—Number of units: _____ <input type="checkbox"/> Other: _____ — Number of units: _____	

Names of Owners, Partners, or Corporation Officers. Please print clearly (use additional sheets if necessary):

Name	Street Address	City, State, ZIP Code	Social Security Number

FEDERAL PRIVACY ACT INFORMATION

Under the general authority of Oregon Administrative Rule (OAR) 150-305.100, the Social Security numbers of all company officers or owners must be included in this registration. This information will be used primarily by the Oregon Department of Revenue for identification and compliance purposes in the administration of the State of Oregon lodging tax.

DECLARATION

I declare under the penalties for false swearing [Oregon Revised Statute (ORS) 305.990(4)] that I have examined this document and to the best of my knowledge it is true, correct, and complete.

Signature X	Date
PRINT Name Signed Above	Title
	Telephone Number ()

Mail your completed registration form to: **OREGON DEPARTMENT OF REVENUE**
PO BOX 14110
SALEM OR 97309-0910
 Or fax to: **503-945-8787**

Multiple Vacation Rental Properties Listings

BIN: _____

Name of Facility: _____
(if applicable)

Physical Address: _____

Region (circle): 1 2 3 4 5 6 7 8 9 10

Name of Facility: _____
(if applicable)

Physical Address: _____

Region (circle): 1 2 3 4 5 6 7 8 9 10

Name of Facility: _____
(if applicable)

Physical Address: _____

Region (circle): 1 2 3 4 5 6 7 8 9 10

Name of Facility: _____
(if applicable)

Physical Address: _____

Region (circle): 1 2 3 4 5 6 7 8 9 10

Name of Facility: _____
(if applicable)

Physical Address: _____

Region (circle): 1 2 3 4 5 6 7 8 9 10

Name of Facility: _____
(if applicable)

Physical Address: _____

Region (circle): 1 2 3 4 5 6 7 8 9 10

Name of Facility: _____
(if applicable)

Physical Address: _____

Region (circle): 1 2 3 4 5 6 7 8 9 10

Name of Facility: _____
(if applicable)

Physical Address: _____

Region (circle): 1 2 3 4 5 6 7 8 9 10

Name of Facility: _____
(if applicable)

Physical Address: _____

Region (circle): 1 2 3 4 5 6 7 8 9 10

Name of Facility: _____
(if applicable)

Physical Address: _____

Region (circle): 1 2 3 4 5 6 7 8 9 10

OREGON'S TEN REGIONS

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|------------------|----------------------|---------------------|
| 1. North Coast | 4. Willamette Valley | 8. Mt. Hood / Gorge |
| 2. Central Coast | 5. Portland Metro | 9. Northeastern |
| 3. South Coast | 6. Southern | 10. Southeastern |
| | 7. Central | |

