

Luzerne County Hotel Room Rental Tax Application

200 North River Street
Wilkes-Barre, PA 18711
570.825.1782

1. Name or Trade Name: _____

2. Location of principal place of business (Post Office Boxes are not acceptable):

Telephone # _____

3. Billing address (if different than #2). All records involving County of Luzerne transactions must be kept at the business location.

Telephone # _____

4. Federal Employer Identification Number (EIN): _____

5. Applicant is operating as: _____ an individual _____ a partnership _____ an association
_____ a corporation _____ other _____

6. Please list the name(s), title(s), and telephone number for individual(s) responsible for remitting the County Room Rental Tax:

Name _____ Title _____ Phone # _____

Name _____ Title _____ Phone # _____

7. Type of business: _____ Hotel _____ Motel _____ Bed & Breakfast _____ Inn
_____ Guest House _____ Other _____

8. Do you provide meals? _____ Yes _____ No

9. Does the charge for occupancy of room include meals? _____ If so, which meals? _____

10. Number of lodging rooms: _____

11. Price Range:

Single Rooms:

Per Day _____

Per Week _____

Per Month _____

Double Rooms:

Per Day _____

Per Week _____

Per Month _____

I certify that the information provided on this application form has been examined by, and is, to the best of my knowledge, true and correct.

Name _____ Title _____

Signature _____ Date _____ Social Security # _____

Upon completion of this application and issuance of the Certificate of Authorization, you will be authorized by the Luzerne County Treasurer to collect the Lodging Room Rental Tax of Luzerne County.