



City of Elko
 1751 College Ave.
 Elko, NV 89801
 Phone (775)777-7138
 Fax (775)777-7129
 Email: buslic@elkocitynv.gov

APPLICATION FOR TRANSIENT LODGING TAX

This application must be filed by every individual, partnership, corporation, or other organization having one (1) or more rooms, spaces or other accommodations that provides transient lodging to tenants in exchange for compensation in accordance with Ordinance 828.

Please complete this form and return it to the office indicated above.

1. BUSINESS NAME: _____
2. BUSINESS ADDRESS: _____
3. PHONE NUMBER: _____
4. EMAIL: _____
5. TYPE OF ORGANIZATIONS (Check One) Individual _____ Partnership _____
 Corporation _____ Other (describe): _____
6. PLEASE LIST ALL OWNERS: (attach additional pages if necessary)

NAME	TITLE
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NAME	TITLE
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NAME	TITLE
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7. MANAGER: _____

NAME	PHONE NUMBER
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8. NUMBER OF RENTAL UNITS _____

9. NAME OF PERSON FILING MONTHLY RETURN (If filed by Public Accountant, Auditor, Trustee, etc.

NAME	PHONE NUMBER/EMAIL
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 ADDRESS

I hereby certify that the information contained in this application is true and correct to the best of my knowledge and belief.

NAME	TITLE	DATE
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