

**ORANGE COUNTY, FLORIDA
TOURIST DEVELOPMENT TAX
REGISTRATION FORM INSTRUCTIONS**

GENERAL INFORMATION

Please download the registration form, complete all required information, print and sign form, and mail to:

Accounts Receivable, Orange County Comptroller, P O Box 4958, Orlando FL 32802-4958

Or:

Email completed form to: tdinquiry@occompt.com

Or:

Fax completed form to: [\(407\) 836-5626](tel:(407)836-5626)

USER INFORMATION

- a. The information in this section pertains to the person or company responsible for collecting and remitting the tourist development tax for the rental property.
- b. The primary contact is the individual who should be contacted with questions regarding your account.
- c. This mailing address will be the primary address for all correspondence.
- d. All items that are **BOLD** are required.

Please note: If you have an existing userid and would like to add an additional rental property, please provide the userid and the rental property information and owner information only.

RENTAL PROPERTY INFORMATION

- a. The information in this section pertains to the actual rental property.
- b. The first rental date should be the date of your first short term rental. This will be the first reporting period you are required to file a tax return.
- c. The property address is the street address for the rental property. A post office box is not acceptable.
- d. All items that are **BOLD** are required.

OWNER INFORMATION

- a. The information in this section pertains to the individual/company that owns the rental property.
If you are a property management company that will be submitting one combined return for all of their managed properties, the owner information should be for the property management company.
- b. Enter your Federal Employer Identification (FEI) number. If you do not have a FEI number, please enter your social security number.
- c. Enter the number you have been issued by the Department of Revenue. If you have not received it yet, enter "applied for."
- d. All items that are **BOLD** are required.

FILING INFORMATION

- a. This form is used for all registration requests and changes so please select the appropriate reason for submitting the form.
- b. Only one reason should be selected. If "other" is selected, please provide description.

ORANGE COUNTY, FLORIDA
TOURIST DEVELOPMENT TAX
REGISTRATION FORM

Please download the registration form, complete all required information (all items that are **BOLD** are required), print and sign form and mail to: **Accounts Receivable, Orange County Comptroller, PO Box 4958, Orlando FL 32802-4958**.

USER INFORMATION	
<i>(The information in this section pertains to the person or company responsible for collecting and remitting tourist development taxes.)</i>	
INDIVIDUAL/COMPANY NAME	
PRIMARY CONTACT	
PHONE	
ALTERNATE PHONE	
FAX	
EMAIL	
MAILING ADDRESS LINE 1	
MAILING ADDRESS LINE 2	
CITY	
STATE	
ZIP	
COUNTRY	
<i>(This will be the primary address for all correspondence regarding your tourist development tax account.)</i>	

RENTAL PROPERTY INFORMATION	
<i>(The information in this section pertains to the actual rental property.)</i>	
BUSINESS/RENTAL PROPERTY NAME	
FIRST RENTAL DATE	
<i>(Enter the beginning rental date. This will be the first reporting period you are required to file a tax return.)</i>	
PARCEL ID	
NUMBER OF UNITS	
PROPERTY ADDRESS LINE 1	
PROPERTY ADDRESS LINE 2	
CITY	
ZIP	
<i>(Enter the street address for the rental property. A post office box is not an acceptable address.)</i>	
PHONE	
TYPE OF RENTAL (SELECT ONE)	<input checked="" type="checkbox"/> <i>(Used to identify the type of short term rental property you are registering.)</i>
APARTMENT	<input type="checkbox"/>
CONDOTEL	<input type="checkbox"/>
HOTEL/MOTEL	<input type="checkbox"/>
SINGLE FAMILY RESIDENCE	<input type="checkbox"/>
TIME SHARE	<input type="checkbox"/>
OTHER (DESCRIBE BELOW)	<input type="checkbox"/>

OWNER INFORMATION

(The information in this section pertains to the individual/company that owns the rental property. If you are a property management company that will be submitting one return for multiple managed properties, the owner information should be for the property management company.)

INDIVIDUAL/COMPANY NAME	
MAILING ADDRESS LINE 1	
MAILING ADDRESS LINE 2	
CITY	
STATE	
ZIP	
COUNTRY	
PHONE	
ALTERNATE PHONE	
FAX	
EMAIL	
FEI NO. OR SS NO.	

(Enter your Federal Employer Identification (FEI) number. If you do not have a FEI number, enter your Social Security (SS) number.)

STATE SALES TAX NO.	
----------------------------	--

(Enter the number you have been issued by the Department of Revenue or if you have not received it yet, enter "applied for.")

TYPE OF BUSINESS (SELECT ONE)	X	<i>(Check the box pertaining to either the owner of the rental property or property mgmt co.)</i>
INDIVIDUAL		
CORPORATION		
PARTNERSHIP		
TRUST		
GOVERNMENT		
PROF ASSOCIATION		

FILING INFORMATION (SELECT ONE)	X	<i>(Check the box that describes the reason for completing the registration form.)</i>
--	----------	--

NEW APPLICATION		
USER INFORMATION CHANGE		
OWNER INFORMATION CHANGE		
ADD ADDITIONAL RENTAL PROPERTY		<i>(Check only if you are adding to an existing User Name/Account.)</i>
DELETE RENTAL PROPERTY		<i>(Check only if you are deleting from an existing User Name/Account.)</i>
OTHER (DESCRIBE BELOW)		

APPLICANT'S NAME (PRINTED)	
APPLICANT'S SIGNATURE	
DATE	