

## **CITY OF RIVERSIDE**

## Transient Occupancy Tax (TOT) Account Update Form

This form is to be used to update your Transient Occupancy Tax account with the City of Riverside. If there has been a change in ownership, business suspension or closure, please contact us immediately at (951) 346-0006 or email us at RiversideTOT@HdLgov.com.

ESTABLISHMENT NAME				
BUSINESS LOCATION				
	Street			
	City	State	Zip	Country
NAME OF TOT PROCESSOR				
MAILING ADDRESS	- Au .:			
	Attention			
	Street			
	City	State	Zip	Country
	·		•	·
	( ) -			
	_( ) -	FAX	_()	-
OWNERSHIP TYPE	Select one: Sole Proprietorsh	ip, Partnership, LLC, Corporation, 1	Non-Profit, Tru	ist, Other
OWNER/OFFICER (If different from Operator)	Attach additional pages if mu	ultiple owners/officers		
MAH DIG ADDREGG				
MAILING ADDRESS	Attention			
	Street			
	City	State	Zip	Country
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PHONE TOTAL ROOMS FOR RENT		EMAIL AVERAGE DAILY RATE		
CERTIFICATION: I certify and	declare under penalty of pe	rjury that the foregoing is true ar	nd correct to t	he best of my knowledge.
Signature of Owner or Agent				
Title				
Date				