HERNANDO COUNTY

TOURIST DEVELOPMENT TAX APPLICATION

Instructions for completing this application are on the reverse side. **Please Note**: \$5.00 registration fee due when application is submitted.

| Applicant Information: | | | | |
|--|--|----------------|-----|---|
| Owner Name: | Te | elephone # (|) | |
| Mailing Address: | A ^r | ΓΤΝ: | | · |
| City | | | Zip | |
| Social Security # or Federal Id#: | En | nail Address _ | | |
| Sales Use Tax Registration #: | | | | |
| Business Name: | Te | elephone # (|) | |
| Business address: | A ^r . | ΓΤΝ: | | |
| City | | | Zip | |
| Tax Reporting Requirements: Please ch | eck one only | | | |
| ☐ Annual ☐ Semi-Annual | ☐ Quarterly | □ Month | nly | |
| Address: Street | City | State | Zip | - |
| Accommodation Type: Please check one only O Hotel/Motel O Bed & Breakfast O Condominium O R/V Campground O Rooming House O Multiple Unit Structure O Other:(Please Explain): | Single Family Dwelling Mobile Home Cooperatively Owned Apartment | | | |
| Total Units: | | | | |
| Contact Person(s): | | | | |
| Applicant's Signature: Print Applicant's Name Here: | | | | |
| For TDT Office Only: Date received in TDT Office Paid: | | | | |

TOURIST DEVELOPMENT TAX (TDT) - APPLICATION INSTRUCTION SHEET

A \$5 registration fee is due at the time of registration. This fee is payable to the: Hernando County Board of County Commissioners. Remit to: Office of Don Barbee, Jr., Clerk of Circuit Court and Comptroller, Department of Financial Services, 20 North Main Street-Room 230, Brooksville, FL, 34601.

BUSINESS INFORMATION:

Business Name: Corporate, company, or individual name. This is the corporation, company, or individual who is responsible for the collection and remittance of the TDT to the Board of County Commissioners. The business name can be an individual owner of the rented/leased facility or a realty company that is renting/leasing the facility on behalf of the owner.

Telephone #: Phone number for the above referenced business or individual

Business Location: Complete address of the physical location of business referenced above.

ATTN: Person to whom all correspondence should be directed.

Owner Name: Complete name of the owner of rental property (if different from business name).

Mailing Address: Address where tax forms and correspondence will be sent.

TAX REPORTING REQUIREMENTS - DEFINITIONS

<u>Annual:</u> If you did not collect more than \$100 in tax in a period of 12 months, you may file annually. Annual returns are due on or before January 20th for taxes collected the preceding year.

<u>Semi-Annual:</u> If you did not collect more than \$500 in tax in a period of 12 months, you may file semi-annually. Semi-Annual returns are due on or before April 20th (for October through March) and October 20th (for April through September).

<u>Quarterly:</u> If you did not collect more than \$1000 in tax in a period of 12 months, you may file quarterly. Quarterly returns are due on or before the following dates: January 20th (for October through December), April 20th (for January through March), July 20th (for April through June), and October 20th (for July through September).

<u>Monthly:</u> Rentals which do not qualify for annual, semi-annual or quarterly will be classified as monthly. The monthly tax returns are due on or before the 20th of each month covering rentals from the previous month.

PHYSICAL LOCATION INFORMATION OF THE RENTAL PROPERTY:

Address: Complete address of the rented/leased facility.

Accommodation Type: Please check the selection that applies to the rented/leased facility.

Total Units: Total number of physical units available for rent/lease at this location (e.g., duplex - 2 units;).

Signature: This application cannot be processed if not signed and dated by the applicant.

GENERAL INFORMATION:

Enclosed with this application should be a flyer with general information regarding the TDT. If this flyer is not enclosed, contact the Department of Financial Services immediately, as it is imperative that you have this information.

You may contact the Department of Financial Services as follows:

By Mail: By E-Mail: By Telephone: By Fax:

Office of Don Barbee Jr. Hernando County Clerk of Circuit Court and Comptroller Department of Financial Services Tourist Development Tax Division 20 North Main Street, Room 230

Brooksville, FL 34601-2800

clerkfinance@hernandoclerk.org ("TDT" required in subject line) 352-754-4225

352-540-6518

For additional information please visit our web site at:

http://hernandoclerk.com

PLEASE BE REMINDED THAT TOURIST DEVELOPMENT TAX RETURNS/RECORDS ARE SUBJECT TO AUDIT BY THE HERNANDO COUNTY CLERK OF CIRCUIT COURT AND COMPTROLLER.