

SANDIE EGLEY TREASURER

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PERMANENT RESIDENT AND EXEMPTION STATEMENT

FOR

THE BEAVER COUNTY HOTEL ROOM RENTAL TAX

COLLECTION PERIOD_____THROUGH_____

BUSINESS NAME_____

The undersigned claims exemption from the Beaver County Hotel Room Rental Tax for the following permanent residents, as defined by Statue of Ordinance.

GUEST	ADDRESS	PRICE CHAF	RGED	DATE OCCUPANY BEGAN
	City	State	Zip Coo	le
	City	State	Zip Co	de
	City	State	Zip Co	ode
	City	State	Zip C	ode
	TOTAL EXEMPT RECEIPTS			
VENDOR'S SIGNATURE		ESTABLISHMENT		

Hotel operators are obligated to maintain records to support and identify this type of exemptions This statement must accompany your monthly tax return.