



Transient Room Tax Registration

PO Box 458 * Veneta, OR 97487 * 541-935-2191 * Fax 541-935-1838 * www.venetaoregon.gov

Contact Information					
Name of property/business (including DBA)				Tax ID number (FEIN or SSN)	
Mailing address			City		State
Physical address of rental property (if different)			City		State
Name of operator/manager		Phone number		Email address	
Name of transient room tax contact (if different)		Phone number		Email address	
Business Information					
If seasonal, which months are open?		Date business started operating		Website address	
Type of business (check all that apply):					
<input type="checkbox"/> Bed & Breakfast		Number of spaces/rooms _____		Number of spaces/rooms _____	
<input type="checkbox"/> Campground		_____		<input type="checkbox"/> Vacation Rental	
<input type="checkbox"/> RV Park		_____		<input type="checkbox"/> Property Management Company	
<input type="checkbox"/> Hotel/Motel		_____		<input type="checkbox"/> Transient Lodging Intermediary	
				<input type="checkbox"/> Other: _____	
Type of business organization:					
<input type="checkbox"/> Individual <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> LLC <input type="checkbox"/> Government					
Names of owners, partners, or corporate officers (use additional sheet if necessary):					
Name		Title		Phone number	
Mailing address			City		State
Name		Title		Phone number	
Mailing address			City		State
Signature					
<i>I declare, under penalty of false swearing, that to the best of my knowledge, the information herein is true, correct, and complete.</i>					
Signature			Title		Date
Print name signed above		Phone number		Email address	

Completed registration may be submitted via mail, fax, or email using the contact information located above.