



City of Moraine Finance Department
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Moraine OH 45439
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**GENERAL INFORMATION AND INSTRUCTIONS
FOR FORM HM2000 REGISTRATION FOR CERTIFICATE OF AUTHORITY
TO COLLECT HOTEL AND MOTEL TAX, CITY OF MORaine**

GENERAL INFORMATION

Every hotel operator is required to obtain a Certificate of Authority to Collect Hotel and Motel Tax from the City of Moraine for each hotel location. The Certificate of Authority authorizes the operator to collect the hotel and motel tax from the guest. The City of Moraine municipal code requires each operator to collect the hotel and motel tax on any rent, fee or charge in exchange for occupancy of a hotel room. The hotel and motel tax is 3% of the rent of the occupancy of a hotel room.

A Certificate of Authority is issued by the City of Moraine Finance Department for each hotel location. The certificate is required to be prominently posted on the premises of each hotel location.

Upon the cessation of business at the location name on the Certificate of Authority or upon the sale or transfer of the business, the hotel operator must immediately surrender the Certificate of Authority to the Finance Director and notify the Finance Director in writing that the operator ceased to conduct a hotel operation at the location. The holder of the Certificate of Authority remains liable for the collection of hotel taxes at the location named in the Certificate of Authority, and for the reporting and remitting of such taxes to the Finance Director, until the Certificate of Authority is surrendered and the notice has been made.

PART A: HOTEL OPERATOR INFORMATION

Name of Hotel Operator: This is the company name that the hotel operator is legally called (i.e. Jefferson Investments dba Ramada Inn, Jefferson Investments is the name of the hotel operator and Ramada Inn is the DBA name).

OBA Name: This is the company name that the hotel operator is doing business as (i.e. Jefferson Investments dba Ramada Inn, Ramada Inn is the DBA name and Jefferson Investments is the name of the hotel operator).

Federal Tax ID Number: This is the federal tax identification number, also known as an EIN (employer identification number) and is applied for and assigned by the Internal Revenue Service.

Ohio State Sales Tax Number (also known as Vendor's License Number): Ohio law requires any person or business making retail sales or taxable services to register and obtain a vendor's license number. This is applied for and assigned by the Ohio Department of Taxation.

Date Operator Started Management of this Location: This is the date that the hotel operator began doing business in the City of Moraine at this physical location.

Mailing Address: This is the mailing address of the hotel operator. Sometimes a post office box or an address for a corporate location out of the local area is used.

Does this Operator Manage Any Other Hospitality Locations in the City of Moraine: This will include not only hotel and motel locations but also restaurants and bars. This will include all establishments providing services including catering and entertainment. If yes, provide other location address(es) and if necessary, attach an additional piece of paper for the information.

Does this Operator Manage Any Other Hospitality Locations in the State of Ohio: This will include not only hotel and motel locations but also restaurants and bars. This will include all establishments providing services including catering and entertainment. If yes, provide other location address(es) and if necessary, attach an additional piece of paper for the information.

Location of Accounting Records: This is the physical location where the accounting records are kept along with contact information for the custodian of the records.

Ownership information-Sole Proprietor: If the owner is a sole proprietor, indicate the type and provide residence address.

Ownership Information-Partnership: If the owner is a partnership, indicate the type and complete page 3 with information for all partners.

Ownership information-Corporation: If the owner is a corporation, indicate the state of incorporation and include the Secretary of State's Corporate Identification Number. Complete page 4 for the Statutory Agent and complete the information for all of the corporate officers.

PART B: HOTEL LOCATION INFORMATION

Hotel Name: This is the name on the facility, i.e. Ramada Inn.

Street Location: This is the physical address of the hotel.

Dote Operation Started: This is the date that the operation began in the City of Moraine.

Number of Rooms Available to Rent: This is the number of physical rooms that are available for guests to rent.

Average Rate: This is the average rate for rooms. Indicate if this is the daily, weekly or monthly rate by checking the appropriate line after supplying the rental rate.

Ownership/Lessor of Real Property Where Hotel is Located: Indicate if the operator owns the land or building where the hotel is located or if the operator leases/manages the land and building where the hotel is located by checking the appropriate line. Provide the information of the property owner along with all contact information. Complete the information regarding the lease term including the number of months on the lease, monthly rental rate and both the effective date and expiration date of the lease.

Date of Fire Inspection: Provide the date that the property was last inspected by the City of Moraine Fire Inspector and received a passing report.

Date Occupancy Permit was Issued: Provide the date that the Building and Zoning department issued the final occupancy permit.

Date Registered with the City of Moraine Income Tax Department: Provide the date the confirmation letter was issued from the Income Tax department. This letter has a heading of "Welcome to the City of Moraine".

Restaurant on-site Serving Food: Indicate if there is a restaurant or food facility on site by checking the appropriate line. If yes, include the Montgomery County Public Health License Number and the date of the last passing Montgomery County Health Department inspection.

Bar/Restaurant on-site Serving Liquor: Indicate if there is a bar, restaurant, room service or food facility serving liquor by checking the appropriate line. If yes, provide the Ohio Department of Liquor Control Permit Number and the permit issue date. Provide the information as to what entity the liquor permit was issued to and include the contact information.

PART C: DECLARATION OF RESPONSIBILITY

Sole Proprietorship: Read paragraph titled Sole Proprietorship-Declaration of Responsibility. Print your name, sign and date.

Partnership: Read paragraph titled Partnership-Declaration of Responsibility. Fill in all required spaces, sign and date.

Corporation: Read paragraph titled Corporation-Declaration of Responsibility. Fill in all required spaces, sign and date.

Return the completed form to the City of Moraine Finance Department, 4200 Dryden Road, Moraine OH 45439.