

Walton County Clerk of Courts and County Comptroller

Tourist Development Tax

REGISTRATION FORM



Business Name:		Owner's Name:	
Username:	Must be 4-15 characters w/ both letters & #'s.	VRBO #:	Please list other rental ad IDs, if applicable.
Federal EIN <u>OR</u> Owner SSN:		FL DOR Sales Tax Certificate Number:	
Property Location:	_____ Street Address including Unit #, if applicable _____ City State Zip Bedroom Count	Mailing Address:	_____ Street Address _____ City State Zip Country
Phone:	(____) ____ - _____ Business (____) ____ - _____ Cell	Email:	_____
Type of Business:	____ Corporation ____ Partnership ____ Individual Proprietorship ____ Other: _____	Date of First Rental:	
Signature:		Type of Rental Property:	____ Single Family Dwelling ____ # of Units ____ Hotel/Motel ____ # of Units ____ Condominium/Townhouse/Apartment ____ # of Units ____ Campground/R.V. Park ____ # of Units ____ Other _____ ____ # of Units
Date:			

RETURN TO: Walton County Clerk of Courts and County Comptroller
 Attn: Tourist Development Tax
 31 Coastal Centre Blvd., Suite 500
 Santa Rosa Beach, FL 32459
 Fax: 850-267-1335

Phone: 850-267-2040

E-mail: touristdevelopmenttax@co.walton.fl.us