CITY OF POMONA
TRANSIENT OCCUPANCY TAX
GOVERNMENT EMPLOYEE EXEMPTION CLAIM FORM

Hotel Name_____ Hotel Address _____
_____

Date of Occupancy: From _____ to _____

Check Appropriate Box: [ ] U.S. Federal Government
[ ] Foreign Government (if exempt by reason of express Provision of federal law of international treaty

_____ _____
Name of Employee Requesting Exemption Government Agency

_____ _____
Agency Department Area Code and Phone Number

_____ _____
Government Street Address City State Zip

I certify that the occupancy of the room noted above has been (or will be) furnished for my exclusive use, and I am the officer, instrumentality, or employee of the governmental agency named above, and that such charges are incurred in the performance of my official duties for said governmental agency.

I declare, under penalty of perjury, that the foregoing is true and correct.

Signature of Hotel Guest Claiming Exemption:_____

Executed at _____, California Date:_____

OPERATOR: A separate exemption claim form is required from each person. Do not accept the claim unless the person provides you with at least one of the acceptable proof of exemptions shown below.* The original of this form AND a copy of the proof of exemption must be maintained by the operator as part of the business records or the claim for exemption from tax may not be approved. The employee must provide photo identification issued by the exempt government agency.

A CONTRACTOR FOR A GOVERNMENT AGENCY IS NOT EXEMPT FROM THE TRANSIENT OCCUPANCY TAX.

*Acceptable Proof of Exemption:

1. A copy of the warrant or check drawn on the treasury of the United States.
2. A copy of the official travel orders indicating the issuing governmental agency and the person's full name.
3. A copy of a letter on the official letterhead of an exempt governmental agency requesting exemption and listing the employee's name and stating that the stay is for official governmental business. The dates of occupancy must also be included.