



The City of
OKLAHOMA CITY
 DEPARTMENT OF FINANCE
 City Treasurer's Office

INDIVIDUAL EXEMPTION FORM

By completing and signing this form I am attesting to the fact that I am exempt from the payment of The City of Oklahoma City hotel tax for one of the following reasons:

PLEASE CHECK THE APPROPRIATE BOX

- I am residing at this hotel for at least thirty (30) consecutive days with permanent residency ending when any break in such residency occurs. This exemption is **retroactive to the first day of residency**.
- I am an employee of the United States government or one of its agencies or divisions staying at this hotel on business related to my job with applicable charges **paid directly** by the United States government or agency.
- I am an employee of the State of Oklahoma or a political subdivision staying at this hotel on business related to my job with applicable charges **paid directly** by the State of Oklahoma or political subdivision.
- I am an employee of a public school system or state accredited private school and staying at this hotel on business related to my job with applicable charges **paid directly** by the school.
- I am an employee or member of a church staying at this hotel on business related to my church with applicable charges **paid directly** by the church.

Complete the following information (please print):

Name of Exempt Entity _____

Name of Guest _____

Address, City, State, Zip _____

Contact Phone Number _____ E-Mail Address _____

Method of Payment (Cash, Check, Credit Card) _____

The above information is true and correct to the best of my knowledge.	
Signature	Date

Hotel Use
Hotel Name: _____
Certificate #: _____
Rec'd By & Date: _____