



CITY OF BURLINGAME

FINANCE DEPARTMENT

501 Primrose Road Burlingame CA 94010-3997

(650) 558-7200 Fax: (650) 342-8386

Web Site: www.burlingame.org

EXEMPTION CERTIFICATE

(Tax on Occupancy of Hotel Rooms)

To be retained by operators of hotels, motels and similar accommodations as evidence of tax exempt occupancy.

Date: _____

Name of Hotel or Motel: _____

Address: _____

Dates of Occupancy: _____

This is to certify that I, the undersigned, am a representative of the United States government department, agency or instrumentally indicated below; that the charges for the occupancy at the above establishment on the dates set forth below have been or will be paid for by such governmental unit; and that such charges are incurred in the performance of my official duties as a representative of such governmental unit.

Guest Name: _____
(Printed)

Guest Signature: _____

Traveler photo ID verified by: _____
Authorized Hotel Employee Signature

*Note Required Attachments: Travel Orders