

Date

CITY OF TULSA Lodging Tax Account Update Form

This form is to be used to update your Lodging Tax account with the City of Tulsa. If there has been a change in ownership or there has been a closure of business, please contact us immediately at: (539) 233-6136 or email us at: Tulsalodgingtax@HdLgov.com.

ESTABLISHMENT NAME									
BUSINESS LOCATION	Street								
NAME OF LODGING TAX PROCESSOR	City			State		Zip		Country	
MAILING ADDRESS	Attention								
	Street								
BUS. PHONE	City ()	-	State	EMAIL	Zip		Country	
CELL	()	-		FAX	()	-	
OWNERSHIP TYPE: OWNER/ OFFICER:	Select one	: Sole Proprie	etorship, Partners	ship, LLC, Corporation, N	Non-Profit, T	rust, Other	(If there has I or at (539) 23	been a change of ownership, please contact 33-6136)	us at Tulsalodgingtax@Hdlgov.com
(If different from Operator)	Attach ac	dditional pag	es if multiple ov	wners/officers					
MAILING ADDRESS	Attention								
	Street								
Phone	City ()	-	State	EMAIL	Zip	p	Country	
TOTAL ROOMS FOR RENT					AVERAGE DAILY RATE				
CERTIFICATION: I certify	and decla	are under	penalty of pe	erjury that the fore	going is t	rue and (correct to t	the best of my knowledge.	
Signature of Owner or Agent				_					
Title									