



- For City use only -

PERMIT NUMBER: _____

DATE OF APPLICATION: _____

DATE OF APPROVAL: _____

**MUNICIPAL TAX PERMIT APPLICATION
CITY OF SUN VALLEY
REQUIRED PER ORDINANCES 484 & 507
THERE IS A ONE TIME \$10.00 FEE FOR THIS PERMIT**

Business Name: _____ Business Type: _____

If a new business, please indicate the proposed opening date: _____

Business Physical Location: _____

Business Mailing Address: _____
(address) (city) (state) (zip)

Business Phone Number: _____ Email Address: _____

Owner Name: _____

Owner Mailing Address: _____
(address) (city) (state) (zip)

Owner Phone Number: _____ Email Address: _____

Please complete this section only if your business is a vacation rental:

Physical Address of Rental: _____

Property Manager (if other than yourself): _____ Phone: _____

Email: _____

Please list any websites where you advertise your rental. Include the listing name and/or number:

The undersigned agrees to collect the following applicable taxes (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Four percent (4%) Occupancy Sales (Lodging, Hotel, Motel Rentals) | <input type="checkbox"/> Four percent (4%) on Golf Membership & Fees/Green Fees |
| <input type="checkbox"/> Four percent (4%) on Food and Beverage or Alcohol by the Drink | <input type="checkbox"/> Four percent (4%) on Event Admission Sales |
| <input type="checkbox"/> Four percent (4%) on Lease/Rental of Tangible Personal Property | <input type="checkbox"/> Two percent (2%) on Building and Construction Materials |
| <input type="checkbox"/> Two percent (2%) on Ski Lift Tickets/Season Ski Passes | <input type="checkbox"/> Three percent (3%) All other Sales not mentioned above |

The undersigned further agrees to remit the above municipal tax using the same schedule as required for remittance of taxes to the Idaho State Tax Commission.

Taxes will be remitted for each calendar: Month _____ Quarter _____ Year _____

Taxes are due on or before the 20th day of the succeeding month to the City Clerk's Office at PO Box 416, Sun Valley, ID 83353.

Applicant Signature: _____ Date: _____