



**TAX ADMINISTRATION**  
www.WakeGov.com/tax

TEL 919 856 5999

FAX 919 743 4728

**Gross Receipts Tax Division**

Wake County Justice Center  
301 S. McDowell Street, Suite 3800  
P.O. Box 2719 Raleigh, NC 27602

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**ROOM OCCUPANCY TAX APPLICATION**

**SELECT ONE:** Sole Proprietorship\_\_\_\_\_Partnership\_\_\_\_\_Corporation\_\_\_\_\_L.L.C.\_\_\_\_\_  
Other (please specify) \_\_\_\_\_

**OWNER/CORPORATION INFORMATION:**

Name: \_\_\_\_\_Telephone: \_\_\_\_\_  
Physical Address: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_

**INDIVIDUAL/CORPORATE OFFICER INFORMATION:** (Residence Address/Telephone)

Name: \_\_\_\_\_Home Telephone: \_\_\_\_\_  
Home Address: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_

**BUSINESS INFORMATION:**

Trade Name: \_\_\_\_\_  
Location: \_\_\_\_\_  
Contact Name/Title \_\_\_\_\_  
Contact Telephone: \_\_\_\_\_Business Telephone: \_\_\_\_\_  
Federal Tax ID #: \_\_\_\_\_Business Begin Date: \_\_\_\_\_

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**Return completed application to:**

Wake County Tax Administration Gross Receipts Division  
P.O. Box 2719 Raleigh NC 27602

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