INDIAN RIVER COUNTY, FLORIDA TOURIST DEVELOPMENT TAX COLLECTION REGISTRATION FORM

PROPERTY INFORMATION	Office use only Account No.: Municipality:
Unit Name	TYPE OF BUSINESS ORGANIZATION:
Street Address	☐ Corporation ☐ Partnership
Unit	\Box Trust \Box Government
UnitCity, State, Zip	☐ Individual ☐ Professional Association
City, State, Zip	
Parcel ID #	TYPE OF RENTAL:
1 arcei 1D #	— ☐ Apartment ☐ Mobile Home Park
Date of First Rental	1
Date of Pilst Rental	☐ Campground ☐ Recreational Vehicle Park
Haina Ain DaD an VDDO	10
Using Air BnB or VRBO?	☐ Hotel / Motel ☐ Time Share
OWNER INFORMATION	NUMBER OF RENTAL UNITS:
Name	Filing Frequency Preference: (please check one)
Address	
City, State, Zip	—— ☐ Monthly ☐ Quarterly ☐ Semi-Annually ☐ Annually
City, 2 wite, 2-p	
Phone Number: ()	Sales Tax Account No
	Contact Person:
	Contact Phone Number: ()
DEALER INFORMATION	EMAIL ADDRESS:
(If different from owner information.)	
Name	Applicants Signature Date
Address	
City, State, Zip	
- · · · · · · · · · · · · · · · · · · ·	
Phone Number ()	

Return completed form to: Ryan L. Butler, Clerk of Circuit Court, Attn: Irene Haas, P.O. Box 1028, Vero Beach, FL 32961