

CITY OF NEWPORT, RHODE ISLAND
CERTIFICATE OF GUESTHOUSE (UP TO 2 ROOMS)
CERTIFICATE OF HOTEL (3 OR MORE ROOMS)

PLEASE TYPE OR PRINT CLEARLY

____ Received Copy of
Chapter 5.40

HOTELS

Retail Sales Tax Permit Number: _____

Name of Establishment: _____

Address of Establishment: _____

Please Check Number of Rooms: **GUESTHOUSE:** (1)____ (2)____ or **HOTEL (3 or more rooms) :** _____ **No. of Rooms**

Owner Name: _____

Owner Address: _____

Owner Telephone Number(s): (_____) _____

Operator/Manager Name: _____

Operator/Manager Address: _____

Operator/Manager Telephone Number(s): (_____) _____

I HEREBY CERTIFY (FOR HOTEL REGISTRATION -- THREE (3) OR MORE ROOMS):

____ That the owner or manager will reside at and be present at the guesthouse premises. (Guesthouses permitted by right in commercial and business zones are exempt from this provision.)

____ That the above information is true and correct and a six percent (6%) hotel tax due on the room sales for each room will be collected by the establishment and forwarded to the TAX COLLECTOR, CITY OF NEWPORT, RHODE ISLAND.

____ That the seven percent (7%) RI Sales Tax due on the room sales for each room will be collected by the establishment and forwarded to the RHODE ISLAND DIVISION OF TAXATION.

I HEREBY CERTIFY (FOR GUESTHOUSE REGISTRATION – ONE OR TWO ROOMS ONLY):

____ That the owner will reside and be present at the property; that the above information is true and correct and that a seven percent (7%) R.I. sales tax due on the sale of each room will be collected. **SEVEN PERCENT (7%) SALES TAX DOES NOT APPLY TO ONE (1) ROOM GUEST HOUSES.**

ALL TAXES AND UTILITY CHARGES MUST BE PAID UP TO DATE BEFORE ISSUANCE OF CERTIFICATE. THE PAYMENT OF ROOM TAXES MUST BE KEPT CURRENT ON A MONTHLY BASIS TO MAINTAIN VALID REGISTRATION.

EFFECTIVE JUNE 1, 2009, TO MAY 31, 2010

POST IN PLAIN VIEW IN THE LOBBY OF ENTRANCE AREA

I hereby certify that the above information is correct and I understand that any false statements made herein are subject to penalties under law as required by Section 44-18-18 of the R.I. General Laws:

Authorized Signature

Title

Date

\$50.00 Fee Paid: _____

City Clerk

THIS CERTIFICATE IS NOT TRANSFERABLE

The City Clerk shall be notified within thirty (30) days of any change in ownership.