

**CITY OF SYCAMORE**  
**APPLICATION FOR REGISTRATION**  
**HOTEL/MOTEL TAX**

When completed, mail this form to:

City of Sycamore  
Finance Department  
308 W. State St.  
Sycamore, IL 60178

For taxpayer assistance, call:  
(815) 895-4920  
Monday - Friday 8:30 a.m. - 5:00 p.m.

Applicant's Business Name: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

This form is to be used by businesses (registrants) with the City of Sycamore for payment of Hotel/Motel Tax as required by the City of Sycamore. (ord.96.71 )

1. Registrant's Business Name \_\_\_\_\_

Address of principal business site: \_\_\_\_\_

City \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone \_\_\_\_\_

2. Mailing address of principal business site:

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

3. Hotel Operator's Occupation tax Number \_\_\_\_\_

Federal Employer IDS [ FEIN ] \_\_\_\_\_

Illinois Sales Tax Registration Number \_\_\_\_\_

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6. Registrant's type of business organization:

Mailing address of business organization. Please print.

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

City \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

7. Owner's, corporate officers, or general partners. Please print.

Name(s): \_\_\_\_\_ Title(s): \_\_\_\_\_

Address(es): \_\_\_\_\_

Telephone: \_\_\_\_\_ Cellphone: \_\_\_\_\_

City(ies): \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

8. Person who will be responsible for submitting restaurant & bar tax returns to the City of Sycamore. Please Print.

Address(es): \_\_\_\_\_

Telephone: \_\_\_\_\_ Cellphone: \_\_\_\_\_

Under Penalty as provided by law, which includes a fine, imprisonment, or both, I declare that I have examined this registration form, and to the best of my knowledge and belief, the information entered on this form is true, correct, and complete.

Date:

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Signature of Registrant or Officer  
empowered to sign for the corporate entity

***Payment due by the 15th of each month***

By

Print or type name above