A claim for refund must be made within 90 days after payment of transient occupancy tax. Supporting documentation shall include (1) hotel or motel receipt(s), (2) an exemption travel authorization, (3) copy of written contract if stay was 31 days or longer, and (4) this form. Please complete the following:

Federal Government Agency:

Claimant’s Name:

Claimant’s Mailing Address (include street, city, and zip code):

Name of Hotel or Motel:

Hotel or Motel Address (include street, city, and zip code):

Occupancy dates: from to

AMOUNT OF TAX REFUND REQUESTED $____________________________

Questions may be directed to the Finance Department by calling (805) 564-5341.

The undersigned, under penalty of perjury, states that the above claim for refund and the items therein set out are true and correct, that no part thereof has heretofore been paid, and that the amount therein is justly due claimant.

Signature ______________________________  Date

Return this form with a copy of your hotel or motel receipt(s) and a copy of your exemption authorization to:

City of Santa Barbara
Finance Department
Transient Occupancy Tax
P.O. Box 1990
Santa Barbara, CA 93102-1990

Revised 01/24/07