

**Form HMX-2 HOTEL MOTEL EXEMPTION CERTIFICATE FOR  
NON-TRANSIENT RESIDENT/GUEST**



City of Centerville Finance Department  
100 West Spring Valley Road  
Centerville, Ohio 45458  
P: 937-433-7151  
F: 937-433-0310

This form is to be completed by a non-transient resident/guest whose stay exceeds 30 consecutive days who requests exemption from the City of Centerville's Hotel and Motel Tax. A written lease contract/agreement must be signed by both the non-transient resident/guest and the hotel operator. The hotel operator must retain this completed form and all supporting documents for four years.

Name of Hotel: \_\_\_\_\_

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

Dates of Occupancy:

Check in: \_\_\_\_\_ Check out: \_\_\_\_\_

Amount paid for the room: \$ \_\_\_\_\_ Per: \_\_\_ Daily \_\_\_ Weekly \_\_\_ Monthly

Person Requesting Exemption:

Name of resident: \_\_\_\_\_ Telephone: \_\_\_\_\_

Street address: \_\_\_\_\_ Email address: \_\_\_\_\_

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

I hereby declare under penalty of perjury that I am a non-transient resident whose stay exceeds 30 consecutive days, and that the foregoing facts and statements are true and correct.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Note: In all cases in which the tax is not collected by the operator, the operator shall be liable for the tax due on the taxable rent received for the rental as though the tax had been paid by the occupant.

Operators should not accept this certificate unless the person presenting it submits satisfactory proof that he/she meets the requirements for the exemption. A separate exemption certificate is required for each occupant claiming this exemption.

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**TO BE COMPLETED BY HOTEL OPERATOR/STAFF**

This exemption is not valid unless copies of the lease contract/agreement and proof of payment for at least 30 consecutive days of continuous occupancy are attached.

VERIFIED BY:

Print Hotel Employee's Name: \_\_\_\_\_

Hotel Employee's Signature: \_\_\_\_\_

Date: \_\_\_\_\_