

TOURIST DEVELOPMENT TAXDealer Request to Close Account

Please Complete Form Below

Tourist Development Tax Account #:				Effective Date:	
Business Name:					
Choose one:	*Hotel/Motel	Real Estate	Agency	Property Management Company	
*Address if Hotel/N	Motel:				
Person completing	form: Busine	ess Owner	Tax Collecting	g Agent Other	
Tax Collecting Age	ent Listed on Accoun	t: Yes (If Y	Yes, complete form)	$No \ ({\rm If} \ {\rm No, owner must complete form})$	
Multiple properties	on account:	Yes	No		
Has a final tax remitt	ance been submitted	and paid?	Yes	No	
Has a Certificate of Co the purchaser?	ompliance been reque Yes	sted and received No	d from the Flori	da Department of Revenue and provided to	
Company i	ppropriate reason for no longer handling should – Date of Sale:	ort term (6 mon		aser:	
0.1					
Other (explo	un)				
Declaration: Please note liable for penalties under provided in Section 213.0	that any person who is requite provisions of Section 21053 F.S. and is not subject to	13.29, Florida Statute o Florida Public Reco	s (F.S.). All inform ords Law, Section 1	d pay any taxes and willfully fails to do so shall be lation provided by the applicant is confidential as 19.07 F.S. By providing an e-mail address, you e that I have read the foregoing document and the facts	
Declaration: Please note liable for penalties under provided in Section 213.0 consent to electronic com	that any person who is requite provisions of Section 21 153 F.S. and is not subject to munication, reporting, and f	13.29, Florida Statute o Florida Public Reco iling. Under penalty o Printed Name	s (F.S.). All inform ords Law, Section 1 of perjury, I declard	nation provided by the applicant is confidential as 19.07 F.S. By providing an e-mail address, you e that I have read the foregoing document and the facts Date:	
Declaration: Please note liable for penalties under provided in Section 213.0 consent to electronic comstated in it are true. Signature:	that any person who is requite provisions of Section 21053 F.S. and is not subject to munication, reporting, and f	13.29, Florida Statute o Florida Public Reco filing. Under penalty of Printed Name to: TouristTaxAud spector General Depart	s (F.S.). All information of the perjury, I declared the perjury, I declared the perjury is a second to the perjury of the per	nation provided by the applicant is confidential as 19.07 F.S. By providing an e-mail address, you e that I have read the foregoing document and the facts Date:	
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