



**KEVIN C. KARNES**  
**CLERK OF THE COURT**  
**& COMPTROLLER**  
 LEE COUNTY, FLORIDA

**Tourist Development Tax Dealer Application**

Under the provisions of 212.15, Florida Statutes (F.S.) Tourist Development Tax becomes Government funds at time of collection and must be remitted to the Department. It may not be turned over to a 3rd party.

**Dealers are required to register with our office.**

**Dealer Information**

*Please Type or Print Clearly*

Legal Name of Business:	Primary Contact Name / Title:	
Trade Name (d/b/a):	Primary Contact Phone No:	
Mailing Address:	Primary Contact E-mail:	
City / State / Zip:	Country (if outside the US):	
Additional Contact Name:	Additional Contact Email:	
Have you registered with the Florida Dept. of Revenue?      Yes      No	Beginning Date of Rental Activity:	
Is this a Hotel or Motel?      Yes - <i>Add address below, continue to Filing Options</i> No - <i>Complete Dealer Property Information below</i>	Address of Hotel or Motel:	
<b>Real Estate Professionals: Are you a licensed Sales Associate or Broker Sales Associate under the direction, control, or management of a Broker? If YES, STOP. The Qualifying Broker is responsible to register, collect and remit Tourist Tax. If NO, complete Dealer Property Information below.</b>		

**Dealer Property Information**

Attach Excel Property List Spreadsheet	No. of Properties Managed:
<b>FILING OPTIONS: Select ONE</b>	
<i>(A zero return must be filed timely when no rental income is collected in order to avoid penalties)</i>	
<b>QUARTERLY</b> – Tax collected and remitted may not exceed \$2,500 per calendar year. Tax is due for rent collected the 1 <sup>st</sup> of the month following the quarter. Must file four (4) tax returns annually.	
<b>Monthly</b> - Do not qualify for the option above. Rental period is every month and the tax is due the 1 <sup>st</sup> of the following month. Must file twelve (12) tax returns annually.	

**Business Owners, Officers, Partners, Members, or Trustees**

Name & Title:	Mailing Address:	Telephone No:	E-mail:
A.			
B.			

Applicant Declaration (Signature required to process application):

Please note that any person who is required to collect, truthfully account for, and pay any taxes and willfully fails to do so shall be liable for penalties under the provisions of Section 213.29, Florida Statutes (F.S.). All information provided by the applicant is confidential as provided in Section 213.053 F.S. and is not subject to Florida Public Records Law, Section 119.07 F.S. By providing an e-mail address above, you consent to electronic communication, reporting, and filing. Under penalty of perjury, I declare that I have read the foregoing application and the facts stated in it are true.

Applicant Signature: \_\_\_\_\_      Printed Name: \_\_\_\_\_      Date: \_\_\_\_\_  
To digitally Sign, use certified digital stamp here, or ink signature      Print name here

Please save and e-mail to: [TouristTax@leeclerk.org](mailto:TouristTax@leeclerk.org) or mail to:

Lee County Clerk of Courts, Inspector General Department \* PO Box 2257 \* Ft Myers \* FL \* 33902-2257

For more information on Tourist Development Tax, please visit our website at [www.LeeClerk.org](http://www.LeeClerk.org) or call our office at (239) 533-2190.

*For office use only:*

<b>Tourist Tax ID:</b>	<b>Date Entered in Excise:</b>	<b>By:</b>
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