

SARASOTA COUNTY TAX COLLECTOR
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AFFIDAVIT TO INACTIVATE TOURIST DEVELOPMENT TAX ACCOUNT

NAME: _____
(PLEASE PRINT)

TOURIST ACCOUNT NUMBER: _____ DAYTIME PHONE NUMBER: _____

INACTIVATE: Jan. Feb. Mar. Apr. May June July Aug. Sept. Oct. Nov. Dec. Year _____

PERMANENTLY INACTIVATE:

Under penalty of perjury I hereby certify that I do not anticipate any rental activity for the months listed above. I request that my tourist tax account be inactivated. I understand that if I do rent my unit during the period my account is inactive, I must file a return and pay the tax.

Signature

Date

Giving false information in order to avoid collecting and remitting the tourist tax is a criminal offense. Affiant will be subject to prosecution. x-607 11/06