



- For City use only -

PERMIT NUMBER: \_\_\_\_\_

DATE OF APPLICATION: \_\_\_\_\_

DATE OF APPROVAL: \_\_\_\_\_

**MUNICIPAL TAX PERMIT APPLICATION  
CITY OF SUN VALLEY  
REQUIRED PER ORDINANCES 389 & 456**

**Business Name:** \_\_\_\_\_ **Business Type:** \_\_\_\_\_

**If a new business, please indicate the proposed opening date:** \_\_\_\_\_

**Business Physical Location:** \_\_\_\_\_

**Business Mailing Address:** \_\_\_\_\_  
(address) (city) (state) (zip)

**Business Phone Number:** \_\_\_\_\_ **Email Address:** \_\_\_\_\_

**Owner Name:** \_\_\_\_\_

**Owner Mailing Address:** \_\_\_\_\_  
(address) (city) (state) (zip)

**Owner Phone Number:** \_\_\_\_\_ **Email Address:** \_\_\_\_\_

**Please complete this section only if your business is a vacation rental:**

**Physical Address of Rental:** \_\_\_\_\_

**Property Manager (if other than yourself):** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Please list any websites were you advertise your rental. Include the listing name and/or number:**

\_\_\_\_\_

**THERE IS A ONE TIME \$10.00 FEE FOR THIS PERMIT**

**The undersigned agrees to collect the following applicable taxes (check all that apply):**

- |  |   |
|--|---|
| Four percent (4%) Occupancy Sales (rentals less than 30 days)          | Four percent (4%) on Recreation Memberships         |
| Four percent (4%) Restaurant Food and Beverage or Alcohol by the Drink | Four percent (4%) on Event Admission Sales          |
| Four percent (4%) on Lease/Rental of Tangible Personal Property        | Three percent (3%) All other Sales not listed above |
| Two percent (2%) on Ski Lift Tickets/Season Ski Passes                 |   |

**The undersigned further agrees to remit the above municipal tax using the same schedule as required for remittance of taxes to the Idaho State Tax Commission.**

Taxes will be remitted for each calendar: Month      Quarter      Year

Taxes are due on or before the 20<sup>th</sup> day of the succeeding month to the City Clerk's Office at P.O. Box 416, Sun Valley, ID 83353.

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_