



U.S. Department of Transportation
Federal Aviation Administration

FEDERAL AVIATION ADMINISTRATION

OCCUPANCY TAX EXEMPTION CERTIFICATE

DATE: _____

TO: (name of hotel/motel, etc.) _____

Address: _____

This is to certify that I, the undersigned, am a representative of the United States Governmental department, agency, or instrumentality indicated below; that the charges for the occupancy at: the above establishment on the dates set forth below have been or will be paid by such governmental unit; and that such charges are incurred in the performance of my official duties as a representative or employee of such governmental unit.

DATES OF OCCUPANCY FROM: _____ TO: _____

FEDERAL AVIATION ADMINISTRATION

(GOVERNMENT AGENCY)

(Address of Home Office)

Signature: _____

Title: _____

Separate exemption certificate is required for each occupancy and for each representative or employee.

This form is to be retained by operators of hotels, motels, and similar accommodations as evidence of occupancy.