



**COUNTY OF KERN
EXEMPTION CERTIFICATE**

HOTEL/MOTEL OPERATOR:

RETAIN THIS FOR YOUR FILES TO SUBSTANTIATE YOUR REPORTS

If you have any questions about granting this Transient Occupancy Exemption for this **County of Kern Representative or Employee**, please telephone your local City or County Collector to whom you pay your Transient Occupancy Tax for approval.

Date: _____

To: _____
(Name of Hotel or Motel)

Address: _____

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

Date(s) of occupancy: _____

I hereby declare under penalty of perjury that the foregoing statement is true and correct.

Executed at _____, California on _____.
(City) (Date)

(Signature)

(Title)