



COUNTY OF BERKS, PENNSYLVANIA

Office of the Treasurer

Services Center, 2nd Floor
633 Court Street
Reading, PA 19601-4318

Phone: 610.478.6640
Fax: 610-478-6644
Email: treasurer@berkspa.gov

HOTEL TAX APPLICATION

TODAY'S DATE		TYPE OF ESTABLISHMENT	☐ HOTEL	☐ MOTEL	☐ INN/B&B	☐ OTHER
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HOTEL NAME		# OF ROOMS	
STREET ADDRESS			
CITY, STATE, ZIP			

CORPORATE NAME		EIN:	
STREET ADDRESS			
CITY, STATE, ZIP			

MAILING ADDRESS	
CITY, STATE, ZIP	

1 ST CONTACT	NAME		TITLE	
	E-MAIL		PHONE #	x
	ALT E-MAIL		ALT PHONE #	x

ALT CONTACT	NAME		TITLE	
	E-MAIL		PHONE #	x
	ALT E-MAIL		ALT PHONE #	x

I intend to submit my reports and payments by: MAIL ☐ E-MAIL/ACH ☐

I certify that the information provided on this application is true and correct to the best of my knowledge.			
PRINT NAME		TITLE	
SIGNATURE		DATE	

***Upon review and approval of this application, your hotel will receive a certificate authorizing you to collect the Berks County Hotel Tax at the rate of 5%. The certificate will be sent to the mailing address listed above. If you opted to submit your reports/payments electronically via e-mail/ACH, you will be provided with our account information to establish a profile with your financial institution.**