



# LODGING ESTABLISHMENT REGISTRATION

Summit County, Ohio

Parcel Number: \_\_\_\_\_ - \_\_\_\_\_ Unique ID Number: \_\_\_\_\_

Kristen M. Scalise CPA, CFE, Summit County Fiscal Officer, 175 South Main St., Akron, OH 44308  
Phone: (330)643-2437 Email: [summittreas@summitoh.net](mailto:summittreas@summitoh.net) Website: <http://FiscalOffice.summitoh.net>

1. Business Name of Establishment: \_\_\_\_\_

2. Physical Address of Establishment: \_\_\_\_\_

3. Mailing Address: \_\_\_\_\_

4. Owner Information:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

5. Contact Information:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

6. Statutory Agent (if applicable):

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

7. Contact Information of Partners (if applicable):

1.) Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

2.) Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

8. Establishment's Federal I.D. # \_\_\_\_\_

9. Total number of rooms available to rent: \_\_\_\_\_

**The completed form is due by January 31 of the current tax year. Complete the above and return to:**

Kristen M. Scalise CPA, CFE  
Fiscal Officer, County of Summit  
Attn: Lodging Excise Tax  
175 S. Main St., 3<sup>rd</sup> Floor  
Akron, Ohio 44308



**Kristen Scalise** CPA, CFE  
Summit County Fiscal Officer