STATE OF DELAWARE
DIVISION OF REVENUE

EXEMPTION CERTIFICATE
TAX ON OCCUPANCY OF HOTEL AND MOTEL AND TOURIST HOME ROOMS
CHAPTER 61, TITLE 30, DELAWARE CODE

This Part to be Completed by the Operator

Name of Hotel, Motel, or Tourist Home | Fed. EI or SS Number

Address | City | State | Zip Code

This Part to be Completed by the Occupant

This is to certify that I, the undersigned, am a representative of the United States or State of Delaware Governmental Department or agency or public school district indicated below; 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 Government or public school unit; and that such charges are incurred in the performance of my official duties as a representative or employee of such Governmental or public school unit.

Name (Please type or print) | Signature

Governmental Unit | Title

Address | City | State | Zip Code

Date(s) of Occupancy _____

NOTE: A separate Exemption Certificate is required for each occupancy and for each representative or employee.

THIS EXEMPTION CERTIFICATE IS TO BE RETAINED BY THE OPERATORS OF HOTELS, MOTELS AND TOURIST HOMES AS EVIDENCE OF EXEMPT OCCUPANCY.

FORM 6100