

**GRAYS HARBOR COUNTY  
LODGING TAX ADVISORY COMMITTEE APPLICATION**

NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY \_\_\_\_\_ ZIP \_\_\_\_\_ EMAIL \_\_\_\_\_

PHONE: HOME: \_\_\_\_\_ CELL \_\_\_\_\_ WORK \_\_\_\_\_

EMPLOYER/OCCUPATION/TOURISM INDUSTRY AFFILIATION: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

ARE YOU A **COLLECTOR** OR **USER** OF THE HOTEL/MOTEL TAX? \_\_\_\_\_

*\*Note: A “**Collector**” is considered any individual who officially represents a lodging provider that collects the Hotel/Motel Tax in Grays Harbor County from its customers and pays such tax to the County as per State RCW 67.28.*

*A “**User**” is considered any individual who officially represents an organization which facilitates, organizes, and/or operates a tourism generating festival, event, activity or facility that qualifies for the use of HOTEL/MOTEL TAX funds as defined by State of Washington statutes.*

*Other qualifying criteria must also be met as per requirements/recommendations of the State Department of Revenue, State Auditor’s Office, and the Grays Harbor County Lodging Tax Advisory Committee By-Laws.*

PLEASE DESCRIBE HOW YOU ARE INVOLVED IN THE TOURISM INDUSTRY IN GRAYS HARBOR COUNTY AND THE NUMBER OF YEARS OF SUCH INVOLVEMENT:

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PLEASE TELL US WHY YOU WOULD LIKE TO BE CONSIDERED TO SERVE ON THE GRAYS HARBOR COUNTY LODGING TAX ADVISORY COMMITTEE: \_\_\_\_\_

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PLEASE TELL US WHAT PERSONAL ATTRIBUTES YOU POSSESS THAT WILL BE ASSETS TO THE COMMITTEE: \_\_\_\_\_

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PLEASE TELL US ANTHING ELSE YOU WOULD LIKE US TO KNOW WHEN CONSIDERING YOU AS AN APPLICANT TO SERVE ON THE GRAYS AHRBOR COUNTY LODGING TAX ADVISORY COMMITTEE:

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REFERENCES:

- 1) \_\_\_\_\_  
2) \_\_\_\_\_  
3) \_\_\_\_\_

PHONE: \_\_\_\_\_  
PHONE: \_\_\_\_\_  
PHONE: \_\_\_\_\_

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APPLICANT SIGNATURE

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DATE