



County of Carroll

COMMISSIONER OF THE REVENUE OFFICE

605-7 Pine Street
Hillsville, VA 24343



2023 SHORT-TERM RENTAL REGISTRATION

NAME: _____ TELEPHONE: _____

ADDRESS: _____

OWNER OF RENTAL UNIT(S): _____

BUSINESS NAME/TRADE NAME: _____

FED ID#/SS#: _____ (must be entered)

ADDRESS OF RENTAL UNIT: _____

MAP# OF RENTAL UNIT: _____

MULTIPLE UNITS: _____

(IF MULTIPLE UNITS PLEASE ENCLOSE A LIST OF ALL PROPERTY LOCATIONS)

DATE THE RENTAL BUSINESS STARTED: _____

DO YOU QUALIFY AS A BED & BREAKFAST? YES/NO

DO YOU SERVE BREAKFAST? YES/NO

IS YOUR BUSINESS REGISTERED TO PAY THE FOLLOWING TAXES?:

TRANSIENT OCCUPANCY: YES/NO

NAME TRANSIENT OCCUPANCY TAXES ARE REGISTERED/PAID UNDER:

SALES: YES/NO

FOOD & BEVERAGE: YES/NO

PERSONAL PROPERTY: YES/NO

IS YOUR SHORT-TERM RENTAL(S) HANDLED BY A LICENSED REAL ESTATE AGENT? YES/NO

IF YES, PLEASE GIVE NAME OF REALTOR. _____

IS YOUR SHORT-TERM RENTAL HANDLED BY ANY OTHER PROPERTY MANAGEMENT FIRM? YES/NO

IF YES, PLEASE GIVE NAME OF FIRM. _____

If you have any questions please contact the Commissioner of the Revenue Office at 276-730-3080. **This form must be returned to this office no later than February 1, 2023.**

SIGNED BY: _____ TITLE: _____ DATE: _____