

SANIBEL & CAPTIVA ISLANDS CHAMBER OF COMMERCE
Accommodation Authorization Form

Please complete this form (and our Membership Application) and return it to the Chamber via fax (239-395-0783) or mail (1159 Causeway Road, Sanibel, FL 33957). Membership or renewal will be processed upon payment (Visa, Mastercard, or check payable to Sanibel & Captiva Islands Chamber of Commerce) and verification of all licenses.

Business/Individual Name _____

You must meet all of the requirements for accommodations according to the Accommodation Membership Requirements. (See attached).

Please fill out Section 1 OR Section 2

Section 1 – Rental by Owner, self management.

Chapter 509 License # _____

Annual Resale Certificate for Sale Tax # _____

Business Tax Receipt (Sanibel Occupational License) # _____

Tourist Development Tax (Bed Tax) # _____

Sanibel-Captiva walk-in facility address: _____

Sanibel-Captiva telephone number: _____

Sanibel-Captiva contact: _____

Website Address: http://_____

Email Address: _____

Section 2 – Rental by Owner – through a Rental Management Company

Sanibel-Captiva Rental Management Company Name: _____

Rental Management Company Contact: _____

Sanibel-Captiva walk-in facility address: _____

Local telephone number: _____

Local contact: _____

Website Address: http://_____

Email Address: _____

Applicant Signature _____ **Date** _____