



FLOYD COUNTY
P.O. Box 946
Rome, Georgia 30162-0946

HOTEL/MOTEL REGISTRATION FORM

Name of Business _____

Address _____

Mailing Address _____

Telephone # _____

Number of Rooms _____

Name of Owner _____

Address _____

Telephone # _____

This is to certify that the information contained herein is true and correct to the best of my knowledge.

Signed _____

Typed or Printed Name

Title _____

Date _____

This Section to be completed by Clerk's Office:

License # _____

Date Issued _____