

FORM II- Hotel Registration Form

Name of the Hotel :

Taxpayer Number :

Location :

Dzongkhag :

Contact Person and Number :

Sl No.	Type of Room	No of Rooms	Remarks
1			
2			
3			

Other Services, if any :

- 1.
- 2.

The undersigned would like to register my Hotel with the details provided above for providing Food and Lodge at the Government Approved Standard Rates.

Name and Signature

Date :

Note: Please submit this form to the Dzongkhag focal officer.