

**Please submit the completed form to your accommodation facility.**

Appendix 2 of the statute on charging a tax for the promotion and advancement of culture in the City of Cologne

**Stadt Köln**  
Der Oberbürgermeister  
Kassen- und Steueramt  
Athener Ring 4  
50765 Köln

**Official form to § 7 Section 2 of the statute on charging a tax for the promotion and advancement of culture in the City of Cologne in the respective applicable version**

**For employed persons**

Phone +49 221 / 221-96913

As per § 2 Section 1 of the above-mentioned statute, the expenses for the possibility of accommodation that is provided against payment in the City of Cologne are subject to the tax for the promotion and advancement of culture. According to § 2 Section 3 of the statute, the expenses for accommodation are not liable to tax when accommodation is mandatory for work-related reasons. This may, among others, be the case when a legal occupation cannot be performed and therefore income cannot be gained without the accommodation (work-related mandatory accommodation).

In accordance with the provisions of the statute (especially § 12 Section 3) and the Tax Code, the City of Cologne is entitled to request supporting documents with regard to all information provided.

In the knowledge of this regulation and the criminal liability resulting from false statements in a tax assessment procedure, I herewith declare truthfully and to the best of my knowledge and belief the following:

**My accommodation in the City of Cologne is / was mandatory for work-related reasons.**

Name of the accommodation facility	Start of accommodation	End of accommodation
_____	_____	_____

This results from the certification signed by my employer attached to the supporting document.

Name of the employer

_____	_____	_____
Street and building number	Postal code	City
_____	_____	_____

**Information about the declaring person (tax payer and accommodation guest)**

_____	_____
Surname of the declaring person	First name
_____	_____

_____	_____	_____
Street and building number	Postal code	City
_____	_____	_____

_____	_____	_____
State	Date of birth	Place of birth
_____	_____	_____

_____	_____	_____
ID or passport number	Issuing authority	Nationality
_____	_____	_____

_____	_____
Place and date	Handwritten Signature