

# COUNTY CLERK

## HOTEL/MOTEL/CAMPGROUND/OTHER OCCUPANCY TAX

**\*\*IMPORTANT: Taxpayer must file return even though no tax is due to the County Clerk. This report must be filed by the 20th day of the following month for which a report is due.**

Mailing Address

Location

Account:

Owner:

Number of rooms/spaces of occupancy:

Number of permanent residents including owners:

Assessment covers tax period from \_\_\_\_\_ to \_\_\_\_\_

Hotel/Motel Tax

1. Gross Receipts for occupancy of rooms/spaces .....	\$ _____
2. Deductions for Permanent Residents of 30 continuous days or more .....	\$ _____
3. Net Taxable Receipts ( line 1 minus line 2 ) .....	\$ _____
4. Tax Due ( 5% of line 3 ) .....	\$ _____
5. Interest should be figured at 12% per annum. ( daily rate is .000329 of line 4 ) .....	\$ _____
6. Penalty ( 1% for each 30 days of delinquency or any portion of 30 days for tax on line 4 ) .....	\$ _____
7. Total Tax Due .....	\$ _____
8. Credit/Debit Memo .....	\$ _____
9. Total amount due this report .....	\$ _____

I declare under the penalty of perjury that this return has been examined by me and to the best of my knowledge and belief, this is a true, correct, and complete return.

Signed: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

\* Make checks payable to : COUNTY CLERK .\*\*