

RETURN ON TRANSIENT ROOM TAX

BE SURE THIS FORM IS FILLED IN COMPLETELY AND CORRECTLY. THERE ARE PENALTIES AND INTEREST FOR DELINQUENCY.

CHANGE OF ADDRESS must be filed and reported immediately to the City Manager.

IF BUSINESS IS DISPOSED OF OR SUSPENDED, closing return must be filed immediately, at the City Manager's Office at City Hall, and the tax due must be paid. No change of ownership can be recorded until this is done.

CHECKS, DRAFTS, POSTAL NOTES AND MONEY ORDERS in the exact amount of tax due are accepted by the City Manager only as agent of the taxpayer and do not constitute payment until cleared. The City Manager assumes no responsibility for loss in transit.

REMITTANCE: Avoid penalty. Be sure proper remittance is enclosed.

MAKE CHECKS PAYABLE TO: **City of Tillamook**

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| 1. OWNER _____ | 5. CERTIFICATE OF AUTHORITY NO. _____ |
| 2. BUSINESS NAME _____ | 6. ACCOUNTING PERIOD ENDING _____ |
| 3. MAILING ADDRESS _____ | 7. DUE DATE _____ |
| 4. PHONE NUMBER _____ | 8. NUMBER OF ROOMS AVAILABLE _____ |
| | 9. NUMBER OF RV SPACES AVAILABLE _____ |
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| 1. TOTAL ROOMS RENTED (No Complimentary Rooms)
RV SPACES RENTED (No Complimentary Spaces) | | | | | | | | | |
| 2. GROSS RENT | | | | | | | | | |
| LESS: ALLOWABLE DEDUCTIONS: | | | | | | | | | |
| 3. Rent (by month) | | | | | | | | | |
| 4. Rent (less than \$2.00 per day) . . . \$ | | | | | | | | | |
| 5. TOTAL ALLOWABLE DEDUCTIONS (lines 3 & 4) | | | | | | | | | \$ _____ |
| 6. Taxable Rents (line 2 minus line 5) | | | | | | | | | \$ _____ |
| 7. TAX - 10 % of line 6 | | | | | | | | | \$ _____ |
| 8. Add excess tax collected | | | | | | | | | \$ _____ |
| 9. Total of lines 7 & 8 | | | | | | | | | \$ _____ |
| 10. Collection fee - 5 % of line 9 | | | | | | | | | \$ _____ |
| 11. TOTAL TAX DUE (line 9 less line 10) | | | | | | | | | \$ _____ |
| 12. Penalty | | | | | | | | | \$ _____ |
| 13. Interest | | | | | | | | | \$ _____ |
| 14. Adjustment for prior overpayment or (shortage) | | | | | | | | | \$ _____ |
| 15. TOTAL TAX, PENALTY AND INTEREST (line 11 plus 12, 13 & 14
or minus line 14 if shortage) | | | | | | | | | \$ _____ |
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I DECLARE UNDER PENALTY OF MAKING A FALSE STATEMENT, THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE STATEMENTS HEREIN ARE CORRECT AND TRUE.

Signature	Title	Date
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