**\*\*Transient Occupancy Tax Form \*\***

Taxes Collected During Month of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. 20\_\_\_\_\_\_.

Payment made on: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_\_.

Business Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City State Zip

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Total Transient Occupancy Charges Subject to Tax \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Tax on Transient Occupancy @ 5% of (1) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. Less 3% of Tax (Of Line 2) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. Total Tax Due Subtract (3) from (2) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. Penalty (10% of tax due) (If paid after the 20th of the month for prior month) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6. Interest to date: (10% per annum if late) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

7. Total Due: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

This return must be filed by the 20th day of the month following the month taxed, to avoid penalty and interest. Payment must be postmarked by the 20th to avoid penalty. Make checks payable to the Town of Mineral. For information call the Town Office at 540-894-5100. I certify that the figures shown on this form are correct and in accordance with the Transient Occupancy Tax Ordinance. I have examined this return and to the best of my knowledge, it is true, correct and complete.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Authorized Signature