

Mail to:

City of Placerville
3101 Center Street
Placerville, CA 95667

CITY OF PLACERVILLE

TAX RETURN

HOTEL TRANSIENT OCCUPANCY TAX
PURSUANT TO ORDINANCE No. 951

Business License

Tax Certificate No. _____



NAME OF OPERATOR

ADDRESS

Period from _____ 20____ to _____ 20____

1. Total receipts from room rentals \$ _____

EXEMPTIONS

2. Rooms occupied more than thirty days \$ _____

3. TOTAL EXEMPTIONS \$ _____

4. Taxable receipts (line 1 less line 3) \$ _____

5. Amount of tax due (10% of line 4) \$ _____

6. Interest \$ _____ Penalty \$ _____ \$ _____

TOTAL (Result in full) \$ _____

CERTIFICATION

I certify (or declare) under penalty of perjury
That the foregoing is true and correct

Signed _____

Title _____

Owner, Partner, Agent or Officer if Corp., Trustee, etc.

Date _____ 20____

DO NOT
FAIL TO
SIGN HERE

NOTICE

This is a Quarterly Return

The tax will be delinquent if not paid on or
before the last day of the month in which due.

A penalty of 10% will be added after delinquent date
and an additional penalty of 10% will be added if
delinquent more than thirty days, plus interest of one-
half of 1% per month, or fraction thereof on the
amount of tax