

CITY OF DEL REY OAKS

TRANSIENT OCCUPANCY TAX ASSESSMENT RETURN

Submit form and payment to:
 City of Del Rey Oaks
 650 Canyon Del Rey Road
 Del Rey Oaks, CA 93940 (831) 394-8511

Owner's Name: _____

Address: _____

Check the box for the month reported sales occurred:

- 1st Quarter (Jan-Mar) payment due by the last day of April
 2nd Quarter (Apr-Jun) payment due by the last day of July
 3rd Quarter (Jul-Sept) payment due by the last day of October
 4th Quarter (Oct-Dec) payment due by the last day of January

To file this reporting form timely, it is **due on or before the last day of the month following the reporting month**. All fields must be filled in completely or form may be returned and penalties maybe assessed.

1. Gross Receipts for the Period	1	\$
2. Adjustments (Must be itemized, documented, and attached)	2	\$
3. Net Taxable Receipts (Line 1 less Line 2)	3	\$
4. Tax Due (Multiply amount on Line 3 by 10%)	4	\$
5. LATE PENALTY (25% x Line 4 for first 30 days late + Additional 25% x line 4 for over 30 days late)	5	\$
6. INTEREST (1.5% x Line 4 x number of months late)	6	\$
7. TOTAL ASSESSMENTS, PENALTY AND INTEREST DUE (SUM OF LINES 4, 5 AND 6)	7	\$

Payment must be made by **Check, Cash or Money Order** made payable to: **City of Del Rey Oaks**

If you would like a copy of your receipt emailed to you, please supply email address here: _____

I declare under penalty of perjury that the information herein is true and accurate.

Signature _____

Date _____

Title _____

Phone Number _____

For office Use Only

Date Received _____

Amount Received _____

Check or MO Number _____

Staff Signature _____