



CITY OF ESCONDIDO
 Finance Department
 201 North Broadway
 Escondido, CA 92025-2798
 (760) 839-4676

TRANSIENT OCCUPANCY TAX RETURN

Name of Business: _____

Report for the period _____ through _____

- A. Total rents charged..... \$ _____
 - B. Collection of prior delinquent rent..... \$ _____
 - C. Exemptions from rent charged
 - Non-transient rent (greater than 30 days)..... \$ _____
 - Uncollectible debt..... \$ _____
 Total exemptions from rent charged..... \$ _____
 - D. Taxable transient rents charged and received (A+B-C)..... \$ _____
 - E. Amount of tax collected for transient occupancies
(10% of D) \$ _____
 - F. Penalty for failure to remit the tax on or before the last day of the month
following the above report period
(10% of tax [line E] per month to a maximum of 100%) \$ _____
 - G. Interest charge for failure to remit any tax collected—7% per year on the amount recorded
on line E from date on which the remittance first became delinquent until paid \$ _____
- TOTAL AMOUNT DUE (E, F & G) \$ _____**

I declare under penalty of making a false declaration that I am authorized to make this statement and that to the best of my knowledge and belief it is a true, correct, and complete statement made in good faith for the period stated, in compliance with the provisions of the Escondido Municipal Code.

Signature of Operator or Agent: _____

Name: _____ Phone: _____

Title: _____ Date: _____

Please remit form along with check to:

City of Escondido
 Attn: Finance Department (TOT)
 201 North Broadway
 Escondido, CA 92025-2798

IF YOU HAVE ANY QUESTIONS, PLEASE CALL (760) 839-4676