

# CITY OF WINSTON

## TRANSIENT ROOM TAX REMITTANCE FORM

Please fill out form completely. Payment is due on the 10<sup>th</sup> day following the end of the month.

NAME: \_\_\_\_\_

PERIOD COVERED: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

DATE DUE: \_\_\_\_\_

PHONE: \_\_\_\_\_

DELINQUENT AFTER: \_\_\_\_\_

NUMBER OF ROOMS/SPACES: \_\_\_\_\_

### CALCULATION SECTION

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

IF THE BUSINESS IS DISPOSED OF OR SUSPENDED, closing return must be filed immediately at the Office of the City Recorder, City Hall. Tax due must be paid. No change of ownership can be recorded until this is completed.

CHECKS, CASH, MONEY ORDERS AND DEBIT OR CREDIT CARDS, in the exact amount of the tax due are accepted by the Office of the City Recorder only as agent of the taxpayer and do not constitute payment until cleared. The Office of the City Recorder assumes no responsibility for the loss in transit. Postmark date is considered the date of delivery. Please do not mail cash.

REMITTANCE: Avoid penalty – be sure proper remittance is enclosed.

MAKE CHECK PAYABLE  
TO  
CITY OF WINSTON

1. GROSS RENTS . . . . . \$ \_\_\_\_\_  
\* LESS ALLOWABLE DEDUCTIONS
2. Rent by Month . . . . . \$ \_\_\_\_\_  
Government employee. . \$ \_\_\_\_\_
3. TOTAL (Allow deductions) \$ \_\_\_\_\_
4. Taxable rents . . . . . \$ \_\_\_\_\_
5. TAX (7% of line 4) . . . . . \$ \_\_\_\_\_
6. Add excess tax collected \$ \_\_\_\_\_
7. TOTAL TAX DUE . . . . . \$ \_\_\_\_\_
8. Penalty (10% of line 7) . . \$ \_\_\_\_\_
9. Interest (.5% per month) \$ \_\_\_\_\_
10. Adjustment for prior shortage or over payment . . . . . \$ \_\_\_\_\_
11. TOTAL TAX, PENALTY AND INTEREST (Line 7, 8, 9 & 10 or subtract 10 for overpayment) . . . . . \$ \_\_\_\_\_
12. Motel Owner Retention (2% of line 7) . . . . . \$ \_\_\_\_\_
13. Amount to be PAID (Line 11 minus line 12) . . . \$ \_\_\_\_\_

I DECLARE, UNDER PENALTY OF MAKING FALSE STATEMENT, THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE STATEMENTS HEREIN ARE CORRECT AND TRUE.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date