



CRAVEN COUNTY

GROSS RECEIPTS/RENTALS TAX REPORT FOR CRAVEN COUNTY

THIS FORM IS TO BE FILED AND/OR POSTMARKED BY THE 20TH OF EACH MONTH

BUSINESS ACCOUNT NUMBER	OPERATING BUSINESS NAME	REPORT FOR MONTH/YEAR
OWNER	BUSINESS LOCATION	BUSINESS MAILING ADDRESS

1. Gross retail receipts of applicable vehicles (excluding taxes)		\$
2. NC county gross receipts tax	<i>Multiply line 1 by rate of 1.5%</i>	\$
3. If inside city limits of _____	<i>Multiply line 1 by rate of 1.5%</i>	\$
4. Total rental vehicle tax due	<i>Add lines 2 & 3</i>	\$
5. Add penalty if filed after due date	<i>20th of each month</i>	\$
6. Total due	<i>Add lines 4 & 5</i>	\$
7. Additional balance owing or (credit) due		\$
8. Total remitted		\$

CERTIFICATION:

This is to certify that this report is to the best of my knowledge and belief a true and complete report for the month indicated.

SIGNATURE: _____

DATE: _____

Return to:

CRAVEN COUNTY TAX COLLECTOR
226 POLLOCK ST, NEW BERN, NC 28560
OR
PO BOX 1128, NEW BERN, NC 28563

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