



# CRAVEN COUNTY

## OCCUPANCY AND TOURISM DEVELOPMENT TAX FORM

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

BUSINESS ACCOUNT NUMBER	OPERATING BUSINESS NAME	FOR THE MONTH OF
<b>ADDRESS</b>		
<b>MAILING ADDRESS IF DIFFERENT</b>		

1. Gross retail receipts	
2. Less Non-Occupancy related receipts	
3. Less receipts not subject to sales tax	
4. Less receipts after 90 consecutive days	
5. Net retail receipts	
6. 6% OF NET RETAIL RECEIPTS DUE	
<b>PENALTIES</b>	
1. Failure to file your form 5%	
2. Failure to pay by required date 10%	
3. Failure to <u>file</u> and <u>submit payment</u> combined rate at 15%	
<b>TOTAL DUE</b>	
<b>TOTAL AMOUNT REMITTED</b>	

**SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

\* By signing this form, you are stating that this report to the best of your knowledge is true and accurate.

### FOR OFFICE USE ONLY

Acct #: \_\_\_\_\_ Reporting Month: \_\_\_\_\_

Date Received: \_\_\_\_\_ Postmark Date: \_\_\_\_\_