



# City of Ukiah

## Billing & Collection Department

300 Seminary Ave., Ukiah, CA 95482  
(707) 463-6228 FAX (707) 463-6204

### TRANSIENT OCCUPANCY TAX RETURN

PURSUANT TO UKIAH MUNICIPAL CODE

DIVISION 1, CHAPTER 8A

From:

Through:

**Delinquent if not paid on or before:**

(Subject to penalties and interest - see notice below)

**Name of Business:** \_\_\_\_\_

**Address:** Ukiah

#### OCCUPANCY RATE CALCULATIONS

1. Number of Rooms \_\_\_\_\_

7. Less rent to non-transient occupants  
(over 30 consecutive calendar days)

2. Number of Days in Month \_\_\_\_\_

\$ \_\_\_\_\_

3. Total Rooms Available \_\_\_\_\_  
(Multiply #1 times #2)

8. Less amount of any exemptions claimed  
(Attach claim for Exemption Forms)

\$ \_\_\_\_\_

4. Total Rooms Rented \_\_\_\_\_

9. Total Taxable Receipts \$ \_\_\_\_\_

5. Occupancy Rate \_\_\_\_\_  
(Divide #4 by #3)

10. Amount of Tax Due \$ \_\_\_\_\_

\$ \_\_\_\_\_

**(10% of amount in # 9)**

11. Interest (if delinquent)

6. Total Rents Charged \$ \_\_\_\_\_

12. Penalty (if delinquent) \$ \_\_\_\_\_

13. **Total amount enclosed** \$ \_\_\_\_\_

#### *NOTICE*

**This tax will be considered delinquent if not paid on or before 30 days from due date.**

*An additional penalty of 10% will be added if delinquent more than 30 days.*

In addition, 1/2 percent interest will be due for each month that the tax is delinquent.

*Pursuant to City of Ukiah Municipal Code, Division 1, Chapter 8A, Sections 1757A.- E.*

#### *CERTIFICATE*

I hereby certify, I have examined this report and that the statements made and the figures shown herein and in any accompanying schedules are to the best of my knowledge and belief a true and complete return made in good faith for the period stated, pursuant to City of Ukiah Uniform Transient Occupancy Tax Chapter of the Ukiah Municipal Code.

DATE \_\_\_\_\_ PRINT NAME \_\_\_\_\_

SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_

City of Ukiah Municipal Code Division 1, Chapter 8A Hotel-Motel Room Occupancy Tax