

CITY OF



# San Rafael

**Mayor**  
Albert J. Boro

**Council Members**  
Greg Brockbank  
Damon Connolly  
Barbara Heller  
Cyr Miller

1400 FIFTH AVE., P.O. BOX 151560, SAN RAFAEL, CA 94915-1560

## TRANSIENT OCCUPANCY TAX RETURN

Hotel/Motel name:

Reporting period beginning  and ending

1. Total Receipts from room rentals \$

Allowable deductions; must be supported by an exemption form

2. Rents for occupancy by permanent residents \$

3. Rents for occupancy by exempt persons \$

4. Other \$

5. Total allowable deductions (add lines 2 through 4) \$

6. Taxable receipts (line 1 less line 5) \$

7. Tourism assessment (1% of Line 6) **TRAN CODE 5046**

8. Tax (10% of line 6) **TRAN CODE 5045** \$

9. Total due (add lines 7 + 8)

10. Penalty if paid after due date (10% of line 8) \$

11. Interest if paid after due date(1/2% per month of line 8) \$

12. Total due (add lines 9 through 11) \$

\_\_\_\_\_  
Printed Name Title

\_\_\_\_\_  
Signature Telephone Date

*If you would like to receive this form via email please email:  
Joyce.McCarthy@CityofSanRafael.org*