

AUGUSTA-RICHMOND COUNTY PLANNING & DEVELOPMENT
1803 MARVIN GRIFFIN ROAD
P. O. BOX 9270
AUGUSTA, GA. 30906
PHONE (706)312-5038 FAX (706) 312-4277

HOTEL-MOTEL FORM

MONTHLY PERIOD REPORT _____ 20 _____

BUSINESS NAME _____

LOCAL BUSINESS ADDRESS _____

HOME OFFICE ADDRESS _____

PHONE NUMBER _____ FAX NUMBER _____

HOTEL-MOTEL TAX

TOTAL ROOM SALES _____

EXEMPT ROOM SALES _____

TAXABLE SALES: (SUBTRACT LINE 2 FROM LINE 1) _____

HOTEL-MOTEL TAX: ENTER 8% OF LINE 3 _____

VENDER COMPENSATION: ENTER 3% OF LINE 4 _____

BALANCE DUE: SUBTRACT LINE 5 FROM LINE 4 _____

I HEREBY CERTIFY THAT THE STATEMENTS MADE HEREIN AND ANY SUPPORTING SCHEDULES ARE TRUE, CORRECT AND COMPLETE TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT WILLFUL FALSIFICATION OF THE RETURN COULD RESULT IN THE LOSS OF MY BUSINESS LICENSE.

SIGNATURE DATE TITLE

NOTICE: ALL RETURNS ARE DUE AND TAXES PAABLE BY THE 20TH OF EACH MONTH. **VENDOR DISCOUNT IS NOT ALLOWABLE IF THE RETURN IS NOT FILED BY THE 20TH OF THE MONTH.** THE AUGUSTA-RICHMOND COUNTY COMMISSION RESERVES THE RIGHT TO INSPECT AND AUDIT THE BOOKS AND RECORDS OF ANY BUSINESS OPERATING WITHIN THE CONFINES OF ITS JURISDICTION.

MAKE CHECKS PAYABLE TO AUGUSTA-RICHMOND COUNTY AND MAIL PAYMENTS TO P. O. BOX 9270 AUGUSTA, GA. 30916.