



CITY OF ARROYO GRANDE

Transient Occupancy Tax (TOT) Return Form

Every person providing transient lodging for remuneration in the City of Arroyo Grande must collect a tax of ten percent (10%) on the rent paid, unless that rent qualifies for exclusion or exemption (attach a copy of exemption forms). All allowable exclusions and exemptions must accompany this return form. This tax is due on a quarterly basis and payable to the City before the last day of the month following the close of each calendar quarter. For failure to pay by the amount prior to the due date, the lodging provider is subject to pay a penalty on the tax due. The initial penalty is ten percent (10%) of the amount due. Further delinquency of 30 days after the delinquent date is subject to an additional penalty of ten percent 10%. The interest rate of one half percent (.005%) per month is due if the tax is not paid prior to the delinquent date. *Change of ownership, suspension, or disposal of business must be reported immediately.*

FILE ONLINE AT: <https://ArroyoGrande.hdlgov.com>

ACCOUNT NO: _____

Lodging Establishment Name and Address _____

Reporting Period (MM / YYYY) _____

Number of Rooms Rented During the Period _____

Number of Rooms Available During the Period _____

This return is subject to audit:

1. Gross Rent Paid for All Rooms	1. \$ _____
1a. Less: Rent from stays longer than 30 consecutive days (Exemption document must be included.)	(\$ _____)
1b. Less: Other exemptions (Exemption document must be included.)	(\$ _____)
2. Net Taxable Rent: (Line 1 minus Line 1a minus line 1b.)	2. \$ _____
3. Transient Occupancy Tax (10% or 0.1 x Line 2)	3. \$ _____
4. AGTBID Tax (2% or 0.02 x Line 2)	4. \$ _____
5. SLOTMD Tax (1.5% or 0.015 x Line 2)	5. \$ _____
6. TOT Penalty (Line 3 x 10% or 0.10 applied if paid within 30 days after the delinquent date. If paid more than 30 days after the delinquent date, add an additional 10% to the tax due)	6. \$ _____
7. TOT Interest (Line 3 x 1/2% or .005 applied on the day after the due date)	7. \$ _____
8. TOTAL AMOUNT DUE (Sum of Lines 3 through Line 5)	TOTAL \$ _____

I declare under penalties prescribed that the information provided in this return is true and correct to the best of my knowledge.

Signature

Date

Print Name

Title

Please make check payable to: **City of Arroyo Grande**

Mail to: City of Arroyo Grande Lodging Tax Processing Center
8839 N. Cedar Ave #212 • Fresno, CA 93720

Need assistance? Email us at: ArroyoGrandeTOT@hdlgov.com
Ph: (805) 202-4015

**** Term Exclusion:** For stays of more than thirty (30) continuous days or 30 consecutive days stay. In the absence of a prior written contract, the tax must be collected for the first 30 days.