Metropolitan Government of Nashville and Davidson County

Hotel Occupancy Privilege Tax
Metropolitan Code of Laws
Title 5; Chapter 5.12

Collections Office
P.O. Box 196311
Nashville, TN 37219-6311
collections.office@nashville.gov
Telephone 615-862-6215
Fax 615-880-2810

2017042174 (Account Number) | October (Reporting Month) | 2018 (Year)

1240 2nd Avenue S. (Mailing name) | (Business name)
Unit A3 (Mailing address) | (Business address)
Nashville (City) TN (State) 37210 (Zip) | (City) (State) (Zip)
Michael Gomez (Owners name) | (E-Mail Address) | 1 (# of rooms)

Section 1 –Occupancy Tax

1. Gross Rental Receipts from Occupancy of Rooms…… $ 6715.45
2. Allowed Deductible and /or Excludable Receipts (**# of exempt rooms**) ……$
3. Taxable Receipts (line 1 less line 2)……...$ 6715.45
4. Tax Due (6% of line 3)……...$ 402.93
5. OPERATION COMPENSATION: Deduct 2% of line 4 (allowable only if return is filed and tax is paid by due date)……...$ 8.06

COMPUTATION OF INTEREST AND PENALTY FOR DELINQUENT RETURN:

6. Interest @ 8% per annum ……..$
7. Penalty @ 1% per month……$
8. **Total Occupancy Tax Due (line 4 less line 5 if NOT DELINQUENT; if delinquent add lines 4, 6 and 7) $** 394.87

Section 2 – Additional Occupancy Tax

1. Number of rooms rented per night 28 x $2.50 ……....$ 70.00
   (Number of nightly rentals during the month)

COMPUTATION OF INTEREST AND PENALTY FOR DELINQUENT RETURN:

2. Interest @ 8% per annum ……$
3. Penalty @ 1% per month……$
4. Total Interest & Penalty……....$
5. **Total Tax Due (line1 if NOT DELINQUENT: if delinquent, line1plus line 4**…… $ 70.00

TOTAL TAX DUE (Section 1 line 8 *plus* Section 2 line 5)……...$ 464.87

RETURN AND REMITTANCE MUST BE POSTMARKED ON OR BEFORE THE 20TH DAY OF THE MONTH FOLLOWING THE MONTH FOR WHICH THE REPORT IS SUBMITTED.

Make remittance payable to:
METRO COLLECTIONS OFFICE

Mail to: COLLECTIONS OFFICE
PO. BOX 196311
NASHVILLE, TN 37219-6311

Under the penalties for perjury prescribed by law, I swear (or affirm) that this return (including any related schedules, statements, or other documents) is, to the best of my knowledge, a true, correct and complete return.

SIGNED _____ TITLE _____ DATE _____

Please make copy of this form for your records.