

COUNTY OF CHAUTAUQUA

Director of Finance 3 North Erie Street Mayville, NY 14757 (716)753-4223

ROOM OCCUPANCY TAX RETURN FORM

PLEASE PRINT OR TYPE			CERTIFICATE #Year:			
FILING PERIOD (S		Filing Status:				
Quarterly Due Date:	1/1-3/31 April 20 th	4/1-6/30 July 20 th		7/1-9/30 □ October 20 th	10/1-12/31 January 20 th	
		O	R			
Annual (Occupancy Tax collection is less than \$1,500 per				ber year) Due Date January 20 th		
Owner Name:				_ Telephone:		
Address:				_ Zip Code		
Name of establishm	ent(s):					
EMAIL:	If a			roperties included in t	his return	
If you have perma certificate with this retu		business and th	his is your fi	nal return, please m	ark yes and enclose your	
COMPUTATION C	OF TAX					
1. Gross Income Collected From Occupancy of Rooms/Units					Line A	
2. Less: Air BNB rental Income					Line B	
3. Less: Exempt Income Line C (Occupants from Exempt Organizations & Permanent Residents)						
4. Net Taxable Income (Line A minus Line B and Line C)					Line D	
5. County Room Occupancy Tax Due (5% of Line D)					Line E	
6. Penalty – 10% of tax due if postmarked after due date					Line F	
7. Interest – Add 1% of tax for payments postmarked after 30 days of the original due date and an additional 1% for each month thereafter until payment is made.					Line G	
8. Total Amount Due (Line E plus Line F plus Line G)					Line H	
This return must be filed by the return to avoid impo		ace in full for t	the amount o	of tax within 20 days	s after the period covered	
I hereby certify that this re	turn, including any a	ttachments, is to	the best of m	y knowledge a true an	d complete return.	
Signed			Date	-		

Make remittance payable to: Chautauqua County Director of Finance Mail to: Chautauqua County Finance Department GOB 3 North Erie Street Mayville, NY 14757