



City of Burleson Hotel/Motel Occupancy Tax Report

Chapter 74 of the Code of Ordinances

Report Must be Filed Even if No Tax is Due

Hotel/Motel taxes are due on the last day of the month following each quarterly period

Taxpayer Name: _____ Texas Taxpayer Number: _____

Mailing Address: _____ Month Ending Date: _____

Email Address: _____

1. Facility Information	2. Total Room Receipts	3. Exemptions	4. Taxable Room Receipts
Trade Name: _____	\$ _____ . ____	\$ _____ . ____	\$ _____ . ____
Location Address: _____			
Email Address: _____			
Phone No.: _____			
Trade Name: _____	\$ _____ . ____	\$ _____ . ____	\$ _____ . ____
Location Address: _____			
Email Address: _____			
Phone No.: _____			

5. Total Room Receipts (Total of Column 2)	\$ _____ . ____
6. Less: Exemptions for Permanent Residency (30 days or longer)	\$ _____ . ____
7. Less: Other Exemptions	
a.	\$ _____ . ____
b.	\$ _____ . ____
8. Total Taxable Receipts (Line 5 minus lines 6-7) (Total of Column 4)	\$ _____ . ____
9. Total Hotel/Motel Occupancy Tax Due (7% of Line 8)	\$ _____ . ____
10. Interest: If tax is paid after due date, enter interest 7.75% of Line 9; divided by 365; times the number of days late	\$ _____ . ____
11. Penalty: If return is filed or tax is paid after the due date AND it has been delinquent for at least one complete municipal fiscal quarter, enter penalty 15% of Line 9	\$ _____ . ____
12. Total Amount Due and Payable (Line 9 plus Line 10 plus Line 11)	\$ _____ . ____

interest rate is at 7.75% per annum (prime rate plus 1% as reported by Wall Street Journal as of January 1 of current year- changes annually)

Make Check Payable to: City of Burleson

I declare that the information contained in this report and any attachments is true and correct to the best of my knowledge and belief

Mail To: City of Burleson
Financial Department
141 W. Renfro Street.
Burleson, Texas 76028

Sign Here ➤ _____
Taxpayer or Duly Authorized Agent

Phone No.: _____ Date: _____