



City of Coos Bay

Finance Dept.

500 Central Ave., Coos Bay, Oregon 97420 • Phone (541) 269-1181 • Fax (541) 267-5912

TRANSIENT OCCUPANCY TAX

Quarterly Report Period _____ 20 ____ To _____ 20 ____

Name of Business: _____

Contact Name: _____

Phone #: _____

Address: _____

Fees are due quarterly:	January 1st thru March 31st	Due: April 30th
	April 1st thru June 30th	Due: July 31st
	July 1st thru September 30th	Due: October 31st
	October 1st thru December 31st	Due: January 31st

Complete and return Transient Occupancy Tax form along with payment prior to delinquency date. **Make checks payable to: City of Coos Bay.**

Current Payments

Delinquent Payments

(1) Total Rents	\$ _____	(6) Tax Due (line 5)	\$ _____
(2) Less Exemptions (i.e. 30 Day Occupancy)	\$ _____	(7) Delinquent Less than 30 days (line 6 x 10%)	\$ _____
(3) Net Taxable Rents (line 1 less line 2)	\$ _____	(8) Delinquent 30+ days from delinquent date (line 6 x 15%)	\$ _____
(4) Tax Rate	_____	(9) Interest (line 6 x 1% x number of months delinquent)	\$ _____
(5) Total Tax Due (line 3 x line 4)	\$ _____	(10) Evasion of Tax (line 6 x 25%)	\$ _____
		(11) Total Due (total of lines 6 thru 10)	\$ _____

I hereby certify under penalty of perjury that the above information is true and correct to the best of my knowledge and belief.

Authorized Signature Date

Title