



RECEIPT # _____
 INITIAL _____
 DATE _____

**Burnet County
 Report of Hotel Occupancy Tax**

This report is for the month/quarter ending _____

Business Name, Address & Contact Information							
Property Name							
Owner Name							
Location Address		City		State		Zip	
Mailing Address		City		State		Zip	
County ID#		Email Address					
Contact Person		Telephone Number					

Hotel Occupancy Tax Calculation		
1	Total Gross Receipts for the Month/Quarter	
2	Less Receipts Exempted from Tax (all exemptions must be validated by a signed hotel occupancy tax exemption certificate)	
3	Total Taxable Receipts (Subtract line 2 from line 1)	
4	Hotel Occupancy Tax Rate	
5	Hotel Occupancy Tax Due (line 3 multiplied by line 4)	
6	Discount or Penalty and Interest	
6a	Less hotel occupancy tax rebate (line 5 multiplied by 1%)	
6b	Plus penalty if postmarked after Due Date (line 5 multiplied by 5%)	
6c	Plus additional penalty if postmarked more than 31 days after Due Date (line 5 multiplied by 5%)	
6d	Plus additional penalty if postmarked more than 60 days after Due Date (line 5 multiplied by 10%)	
7	Net Tax Due (line 5 - 6a + 6b + 6c + 6d)	

Affidavit
 (Pursuant to Burnet County policy adopted December 8, 2013.)

I declare that the information contained in this Hotel Occupancy Tax Report is accurate to the best of my knowledge and belief.

Duly Authorized Agent (Print Name)	Title	Signature	Date

Payment
Payment is due on the last of the following month. A Penalty will be assessed if postmarked after the due date.

Please remit the following:	(1) The amount due in the form of a check or money order	Remit to:	Burnet County
	(2) An original of this report		Treasurer's Office
	(3) A copy of the quarterly tax report filed with the state comptroller		220 S. Pierce St.
	(4) If no tax collected during the quarter, this report is still required		Burnet, Texas 78611