

County of Schuyler - State of New York
Office of the Treasurer
Return of Hotel Room Occupancy Tax
(Pursuant to Chapter 282 of the 1988 Laws of the State of New York)

Period From: **December 1, 2017** - **February 28, 2018**

Due on or before: **March 20, 2018**

Name: _____

Certificate of Authority No: _____

Address: _____

Name of Hotel: _____

Type of Establishment: Hotel Apartment House Lodging House Motel

Other (Describe): _____

Business Activity

Number of Rooms: _____ If seasonal: Indicate month(s) business was conducted: _____

Gross Income from Room Occupancy _____
Less Exemptions _____
Taxable Room Rentals \$ -

Computation of Tax:	A. Taxable Rooms - Rentals	\$ -
	B. Less Refunds and Credits	\$ -
	C. Net Taxable Rentals (A-B)	\$ -
	D. Tax Due (4% of Line C)	\$ -
	E. Prior Overpayment	\$ -
	F. Prior Underpayment	\$ -
	G. Subtotal (D-E+F)	\$ -
	H. 5% Credit Line G.	\$ -
	I. Interest & Penalties	\$ -
	J. Total Due (G-H+I)	\$ -

*** A 10% Penalty must be added for filing late. In addition, 1% must be added for each month or fraction thereof that payment is delinquent commencing 30 days AFTER late filing date.**

A completed tax return form and remittance in full must be received within twenty (20) days after the period covered by the return to avoid imposition of penalties.

Make Remittance payable to: **Schuyler County Treasurer**
Mail to: **Schuyler County Treasurer**
105 Ninth Street, Unit 17
Watkins Glen, NY 14891

Certificate of Taxpayer:

I hereby certify that this report, including any schedules is to the best of my knowledge and belief true and complete.

Name of Business or Taxpayer

**THIS RETURN MUST BE FILED WHETHER
OR NOT THERE IS TAX TO BE REMITTED**

Signature (Agent of Office of Corp)

/ / _____
Title