



HOTEL OCCUPANCY TAX REPORT

Completed Tax Return and payment must be received by the city or postmarked on, or before, the 20th of the following month in which the tax was collected.

Calendar month for Tax Report: _____ Taxpayer Number: _____
 Name of Motel: _____
 Business Address: _____
 Telephone Number: _____ Fax: _____
 Total Rooms Nights Available: _____ Total Rooms Nights Rented: _____

Computation of Tax Liability

1. Gross Receipts from Room Rentals	\$ _____
2. Less: Exempted Room Rental Receipts (<i>Guidelines on reverse side</i>)	
a. Permanent Residents:	\$ _____
b. US Employees or US Military:	\$ _____
c. Foreign Diplomatic Personnel:	\$ _____
d. State of Texas Employees / Officers:	\$ _____
e. Texas Quasi-governmental Entities:	\$ _____
f. Select Nonprofit Entity Employees:	\$ _____
g. Other Exemptions:	\$ _____
h. Total Exempt Reciepts (add lines 2a thru 2g)	\$ _____
3. Taxable Receipts (<i>line 1 minus line 2h</i>)	\$ _____
4. Tax Liability (<i>line 3 multiplied by 3.0%</i>)	\$ _____
5. Penalty *:	
If payment is made after due date (<i>5% penalty</i>) :	
5% of total on line 4	\$ _____
If payment is made over 30 days from due date (<i>10% penalty</i>) :	
10% of total on line 4	\$ _____
6. Total Amount Due and Payable	\$ _____

Payable to: City of Sulphur Springs

** Delinquent taxes shall draw interest at the rate of 6% per annum beginning 60 days from the date due on the tax imposed and levied herein. Authorized by the City Council of Sulphur Springs. Ordinance No. 738.*

I hereby affirm that the information presented in this report is taken from the books and records of the above named business and is true and correct to the best of my knowledge.

Print Name of Individual Preparing Report Title _____

Signature of Individual Preparing Report Date _____

The completed Tax Report and payment should be mailed to:

**City of Sulphur Springs
125 Davis Street, South
Sulphur Springs, Texas 75482
Attn: Hotel - Motel Tax**

A copy of your completed **TEXAS HOTEL OCCUPANCY TAX REPORT** Form 12-100 **must be** provided with this return.

FOR OFFICE USE ONLY

Date Received: _____ Receipt No.: _____ Form 12-100 received: _____

(FORM REVERSE)

TEXAS HOTEL OCCUPANCY TAX INFORMATION FOR LODGING PROVIDERS

This information is intended as a *guideline* for determining rent exempt from the local Hotel Occupancy Tax only. The meaning of the word "employee" can be inclusive of "officer" and "member."

Term Exemption:

For stays of more than thirty (30) continuous days; -- that is, after thirty (30) consecutive days' stay. The tax must be collected for days one (1) through thirty (30), unless there is in an indication in writing to rent the accommodations for longer than thirty continuous (30) days given by the lodger.

Personal Status Exemptions:

Federal employees presenting documentation. The American Red Cross, federal credit unions and the regional home loan banks are considered instrumentalities of the federal government.

Foreign diplomats presenting identification issued by the United States Department of State.

State of Texas employees presenting the Photo ID Hotel Tax Exemption Card or other documentation indicating that the bearer is Exempt from paying the Hotel Occupancy Tax.

Employees of Texas Housing Authorities and Housing Finance Corporations presenting a Hotel Occupancy Tax Exemption Certificate.

Employees of Texas Health Facilities Development Corporations presenting a Hotel Occupancy Tax Exemption Certificate.

Employees of Texas Public Facilities Corporations presenting a Hotel Occupancy Tax Exemption Certificate.

Employees of Texas Electric Cooperatives and Telephone Cooperatives presenting a Hotel Occupancy Tax Exemption Certificate.

For guest rooms contracted and paid for directly by any of the above named entities, the rent would be exempt from taxation.

The exempt status of any organization can be instantly checked at the State Comptroller's website, <http://www.window.state.tx.us/taxinfo/hotel/>, or by telephoning the Comptroller's office toll free at 1-800-252-1385.