

**City of Grass Valley  
Report of Transient Occupancy Tax**

Report for the Month of: \_\_\_\_\_

Business Name: \_\_\_\_\_ Address: \_\_\_\_\_

Operator Name: \_\_\_\_\_ Phone: \_\_\_\_\_

- |  |    |       |
|--|----|-------|
| 1. Total rent received for all occupancies:          | \$ | _____ |
| 2. Exemptions:                                       |    |       |
| A. For units occupied more than 30 consecutive days: | \$ | _____ |
| B. By government certificates:                       | \$ | _____ |
| 3. Taxable Rents (line 1 minus lines 2a, b):         | \$ | _____ |
| 4. Amount of Tax (10% of line 3):                    | \$ | _____ |
| 5. Penalties (See 1 below):                          | \$ | _____ |
| 6. Interest: (See 2 below):                          | \$ | _____ |
| 7. Total Tax, Penalty and Interest:                  | \$ | _____ |

**Report is Delinquent 30 days after the close of the reporting Month:**  
**(Pursuant to Chapter 3.16.080, City of Grass Valley Municipal Code)**

1. Penalty is 10% of the amount of tax if paid within 30 days after the delinquent date, and 15% if paid thereafter.
2. Interest of 1 ½ % per month or fraction thereof, is payable from the date of delinquency.

I declare under penalty of perjury that to the best of my knowledge and belief that the statements herein are true and correct.

Signed: \_\_\_\_\_ Title: \_\_\_\_\_

Please make check payable to: City of Grass Valley  
Mail to: 125 E. Main St.  
Grass Valley, CA 95945-6505  
Phone: (530) 274-4300

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