



TOWN OF GILBERT

HOTEL/MOTEL OCCUPANCY TAX

REMITTANCE FORM

Name of Hotel/Motel _____

For the Month Ending _____

Please make checks payable to the "Town of Gilbert" and mail to
Town of Gilbert
P.O. Box 188
Gilbert, WV 25621

- | | | |
|----|---|-------|
| 1. | Occupancy gross receipts- all hotel/motel and rooming houses furnished to guests | _____ |
| 2. | Exempt receipts- WV Code 7-18-1 states in pertinent part that the tax shall not be imposed on any consumer occupying a hotel room for <u>thirty</u> or <u>consecutive</u> days. | _____ |
| 3. | Total adjusted taxable receipts (Line 1 less Line 2) | _____ |
| 4. | 6% of total adjusted taxable receipts (6% of Line 3) | _____ |
| 5. | Credit or debit (overpayment in prior months) | _____ |
| 6. | Penalty (\$1.00 per day for late return) | _____ |
| 7. | Total Remittance (sum of 4, 5, and 6) | _____ |

I HEREBY CERTIFY THAT THE INFORMATION SHOWN ON THIS FORM IS IN ACCORDANCE WITH TOWN OF GILBERT ORDINANCE AND IS TRUE AND ACCURATE TO MY KNOWLEDGE AND BELIEF

Signature – Hotel/motel operator/Duly authorized agent

Date