



# TOWN OF IRVINGTON OCCUPANCY TAX MONTHLY REPORT

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

Irvington address of rental: \_\_\_\_\_

### Please indicate the month

JAN  FEB  MAR  APR  MAY  JUN  JULY  AUG  SEPT  OCT  NOV  DEC

- 1. Total lodging charges subject to tax \$ \_\_\_\_\_
- 2. Tax remitted on your behalf from: Online platform/intermediary
 

Platform(s)	\$ _____	\$ _____
	Gross Receipts	Tax paid on your behalf
Platform(s)	\$ _____	\$ _____
	Gross Receipts	Tax paid on your behalf
- 3. Tax on Lodging 4% of line 1 \$ \_\_\_\_\_
- 4. Penalty – 10% \$ \_\_\_\_\_
- 5. Interest \$ \_\_\_\_\_
- 6. Total Amount Due \$ \_\_\_\_\_
- 7. Total Amount Due if After Due Date \$ \_\_\_\_\_

I hereby swear or affirm that the amounts listed above are true, correct and complete to the best of my knowledge and belief for the period stated above.

\_\_\_\_\_  
Signature Title Date

\_\_\_\_\_  
Address if other than rental property Phone Email

**INSTRUCTIONS:** Mail original copy with check payable to the Town of Irvington on/or before the 20<sup>th</sup> day of the month following the month being reported:

Town Clerk  
PO Box 174  
Irvington, VA 22480

For Office Use Only

Date Rec'd \_\_\_\_\_ Check# \_\_\_\_\_