



Town of Luray
Office of the Treasurer, P.O. Box 629
Luray, Virginia 22835
(540) 743-5511

TRANSIENT OCCUPANCY TAX REMITTANCE FORM
with INTERMEDIARY REPORTING

Report for the month of _____, 20 ____

Business Name: _____

Address: _____

Taxpayer ID# _____ Va. Sales Tax Registration# _____

Intermediary Company Name _____

1 Gross Receipts Subject to Lodging Tax	\$			
Portion of Gross Receipts Subject to Lodging Tax by Property Owner		\$		
Portion of Gross Receipts Subject to Lodging Tax by Reporting Intermediary		\$	\$	
2 Exempt Rentals		\$		
2a. Exempt rentals- over 30 days (Detailed attachment required to substantiate the amount being deducted)		\$		
3 Item 1 less Item 2 (a)		\$		
4 Tax (5% of item 3)		\$	\$	
Less 3% deduction of item 4 allowed to defray expenses (Deduction not allowed on past 5 due remittance)		\$		
6 Item 4 less item 5		\$		
7 Penalty for late filing and payment (10% of item 4)		\$		
8 Interest for late filing and payment (12% per annum)		\$		
9 Total tax, penalty, and interest (Sum of lines 6, 7, & 8)		\$	\$	

I swear (or affirm) that I have examined this return, that it is made in good faith, and that to the best of my knowledge and belief all entries made herein, and contained in each schedule or statement attached and made a part hereof, are true, correct, and complete, and in accordance with the law and regulations applicable hereto.

Signature **Title** **Date**

TAX IS DUE EACH CALENDAR MONTH ON OR BEFORE THE 20TH OF THE MONTH FOLLOWING THE MONTH IN WHICH THE TAXES ARE COLLECTED.
 Return original completed form with payment to: Town of Luray, P.O. Box 629, Luray, VA 22835.

****Retain a copy for your records****

Town Office Use Only

Date Paid: _____ Amount: _____ Authorized Signature: _____