

FORSYTH COUNTY HOTEL/MOTEL TAX

MONTHLY ROOMS, LODGINGS, ACCOMODATIONS, EXCISE TAX RETURN

❖ DUE BY THE 20TH OF EACH MONTH

	INFORMATION			
DI ICINIECO NAME:		DATE:		
BUSINESS NAME:				
BUSINESS LICENSE NUMBER:				
BUSINESS ADDRESS:				
OWNER NAME:				
OWNER MAILING ADDRESS:				
EMAIL: PHONE				
REPORT FOR MONTH:				
THE ORT FOR MORE	·			
A separate tax remittance form must be submitted for each property				
	COMPUTATION OF TAX			
TOTAL LODGING		1		
2. TAX EXEMPT LO	DGING SALES (Must be itemized in Schedule A below)	2		
3. NET TAXABLE SA	ALES (Line 1 minus line 2)	3		
4. GROSS TAX (5%	of line 3)	4		
5. PENALTY (15% o	f the amount due on line 4)	5		
6. INTEREST (1% p	er month or fraction thereof from the date delinquent)	6		
7. AMOUNT DUE (L	ine 4 plus lines 5 and 6)	7		1
8. VENDOR'S COM	PENSATION (3% of line 4 if not delinquent)	8		
9. PAY THIS AMOU Mail To: Hotel/Mo	NT (line 7 minus line 8) Make checks payable to Forsyth County tel Tax, Forsyth County, 110 E. Main St., Suite130, Cumming, GA 30040-2474	9		
SCHEDULE A – TAX EXEMPT LODGING SALES (LINE 2)				
Permanent resident	dents (accommodations for more than ten (10) consecutive days)	1		
2. Georgia state of	local government officials or employees	2		
TOTAL TAX-EXEMPT LODGING SALES (Line 2 on Computation of Tax)				
CHANGE OF REGISTERED INFORMATION				
FOR ANY CHANGE OF TRA	DE NAME, ADDRESS, OWNERSHIP, OR TELEPHONE NUMBER, CHECK PROPER BOX(ES) AND FURN	SH APPLICA	TION INFORMATION BELOW	
New Business Location: New Mailing Address				_
New Trade Name: Date Business Discontinued:				_
Name and Mailing Ad	dress of Owner(s):			_
Telephone No: Number of Rooms:				
I certify that the information provided above is accurate and in accordance with Georgia Laws 48-13-50 through 53 and the ordinances of				
the Unified Government of Forsyth County, Georgia known as Forsyth County.		_I Title:		
Signature				_
Return Prepared by: Telephone No:				