

**CONFIDENTIAL
TOWN OF BANNER ELK**

**OCCUPANCY TAX REPORT
(TO BE FILED WITHIN 20 DAYS FROM THE CLOSE OF EACH MONTH)**

FOR THE MONTH OF _____, 20_____

TRADE NAME UNDER WHICH BUSINESS IS OPERATED _____ NAME OF OWNER _____

STREET ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

MAILING ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

SOCIAL SECURITY OR FEDERAL ID NUMBER _____ BUSINESS TELEPHONE NUMBER _____

COMPUTATION OF OCCUPANCY TAX	SALES
1. Gross Retail Receipts (Excluding Sales Tax)	\$
2. Less: Non-occupancy Related Receipts	\$
3. Less: Occupancy Receipts Not Subject to Sales Tax	\$
4. Credits on Previously Charged Exempt Receipts	\$
5. Net Retail Receipts	\$
TOTAL OCCUPANCY TAX DUE	
6. Total Tax (6% of Line 5)	\$
7. Penalty of 5% per Month (\$5.00 Minimum)	\$
8. Total Amount Due	\$
9. Total Amount Remitted	\$
10. Total Room Night Per Month	\$

Certification: This is to certify that this report, including all statements and schedules attached hereto, has been examined by me, and is, to the best of my knowledge and belief, a true and complete report made in good faith covering the month named above and that the same is in accordance with the records of the reporting taxpayer.

Date _____

Signature _____

Please return this report to: Banner Elk Tax Administrator, P.O. Box 2049, Banner Elk, NC 28604