

CRISP COUNTY BOARD OF COMMISSIONERS
Cordele, Georgia



FINANCE DEPARTMENT

210 South 7th Street
Suite 309
Cordele, GA. 31015
Phone: 229.276.2673
Fax: 229.276.2639

HOTEL/MOTEL EXCISE TAX FORM
INSTRUCTIONS

Enclosed are the revised forms for filing your monthly Hotel/Motel Excise Taxes. This form should be returned to the Crisp County Finance Department and will be accepted only if it is properly completed and signed. Please take time to read the instructions and look over the form before you begin. The Hotel/Motel Excise Tax Form must be filed and paid by the 20th of the month following the period for which the tax is due. Please do not alter the original format and contents of the form.

When paid timely, the lodging provider may deduct and retain three percent (3%) of the amount of tax as a vendor's credit. For failure to pay by the due date, the lodging provider not only loses this vendor's credit, but also is subject to paying interest on the tax due. The interest rate is 0.75 of 1% per month or fraction thereof for each month the tax due is delinquent.

INSTRUCTIONS

- LINE 1(a)** Enter the gross total from the revenue received for lodging or accommodations via Hotel bookings.
- LINE 1(b)** Enter the gross total from the revenue received for lodging or accommodations via On-Line Travel Company bookings.
- LINE 2.** Enter the total of Line 1(a) and Line 1(b).
- LINE 3.** Enter total exemptions from page 3, Line 5.
- LINE 4.** Enter the taxable receipts subject to Hotel/Motel Excise Tax by subtracting Line 3 from Line 2.
- LINE 5.** Enter the computed tax due by multiplying Line 4 by 5%.
- LINE 6.** A discount of 3% is allowed providing the form and amount due is not delinquent. Enter on Line 6 the discount allowed by multiplying Line 5 by 3%.
- LINE 7.** Failure to file a timely return and pay the full amount due by the 20th shall result in the assessment of interest on the tax due. Enter the interest due on line 7 by multiplying Line 5 by 0.75 of 1% per month or fraction thereof.
- LINE 8.** If timely, enter the amount due of Line 5 minus Line 6.
If delinquent, enter the amount due of Line 5 plus Line 7.

Print your name, title and a telephone number where you can be reached and sign and date the form prior to submitting.



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DEPARTMENTAL USE ONLY:
Amount To Be Validated \$ _____

HOTEL/MOTEL OCCUPANCY EXCISE TAX MONTHLY REPORT

MONTH OR PERIOD ENDING: _____
CRISP CO. OCCUPATION TAX CERTIFICATE #: _____
BUSINESS NAME: _____
BUSINESS ADDRESS: _____

1. GROSS RECEIPTS RECEIVED FOR LODGING/ACCOMODATIONS THROUGH:
 - (a) HOTEL BOOKINGS: \$ _____
 - (b) ON-LINE TRAVEL COMPANY BOOKINGS: \$ _____ (on page 2, please list names of on-line travel companies)
2. TOTAL GROSS RECEIPTS RECEIVED FOR LODGING OR ACCOMODATIONS (Lines 1a + 1b) \$ _____
3. LESS: EXEMPT RECEIPTS (As allowed under O.C.G.A 48-13-51) \$ _____
- (Line 2 – Line 3) \$ _____
4. TAXABLE AMOUNT \$ _____
5. COMPUTED TAX (multiply Line 4 by 5%) \$ _____
6. 3% Discount The 3% discount will be allowed only if payment is presented by the 20th day of the month; or mail is addressed and postmarked by the 20th day of the month following the month of reporting. \$ _____
7. INTEREST (If delinquent, add 0.75 of 1% per month or fraction of month thereof of Line 5) \$ _____
8. TOTAL AMOUNT DUE (Line 5 minus Line 6; or Line 5 plus Line 7) \$ _____

MAKE CHECKS PAYABLE TO: Crisp County Board of Commissioners
MAIL FORM & CHECK TO: Crisp County Board of Commissioners
 Finance Department
 210 South 7th Street, Suite 309
 Cordele, GA 31015

I HEREBY CERTIFY THAT THE STATEMENTS MADE HEREIN AND IN ANY SUPPORTING SCHEDULES ARE TRUE, CORRECT, AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

SIGNATURE _____
PRINT NAME

TITLE _____
PHONE NUMBER _____
DATE

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Cordele, GA.



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ON-LINE TRAVEL COMPANY NAME

AMOUNT RECEIVED

1. _____	\$ _____
2. _____	\$ _____
3. _____	\$ _____
4. _____	\$ _____
5. _____	\$ _____
6. _____	\$ _____
7. _____	\$ _____
8. _____	\$ _____
9. _____	\$ _____
10. _____	\$ _____
11. _____	\$ _____
12. _____	\$ _____
13. _____	\$ _____
14. _____	\$ _____
15. _____	\$ _____

TOTAL AMOUNT RECEIVED

\$ _____
(Please place this amount on Page 1 Line 1(b))

HOTEL-MOTEL TAX EXEMPTION WORKSHEET AS
ALLOWED UNDER O.C.G.A 48-13-51

FOR THE MONTH OR PERIOD ENDING: _____

(1) Charges made for any rooms, lodgings, or accommodations provided to any persons who certify that they are staying in such room, lodging, or accommodation as a result of the destruction of their home or residence by fire or other casualty; \$ _____

(2) The use of meeting rooms and other such facilities or any rooms, lodgings, or accommodations provided without charge; \$ _____

(3) Any rooms, lodgings, or accommodations furnished for a period of one or more days for use by Georgia state or local governmental officials or employees when traveling on official business. Notwithstanding the availability of any other means of identifying the person as a state or local government official or employee, whenever a person pays for any rooms, lodgings, or accommodations with a state or local government credit or debit card, such rooms, lodgings, or accommodations shall be deemed to have been furnished for use by a Georgia state or local government official or employee traveling on official business for purposes of the exemption provided by this paragraph. For purpose of the exemption provided under this paragraph, a local government official or employee shall include officials or employees of counties, municipalities, consolidated governments, or county or independent school districts; \$ _____

(4) Charges made for continuous use of any rooms, lodgings, or accommodations after the first 30 days of continuous occupancy. \$ _____

(5) TOTAL EXEMPTIONS \$ _____