HOSPITALITY / ACCOMMODATIONS TAX
MONTHLY REPORTING FORM

Business Name

Address

City

State

Zip

Business License Number

Federal Tax ID or Social Security Number

Tax Computation:

1) Gross proceeds from sale of Food/Beverage

2) Gross proceeds from rental of Transient Accommodations

3) Gross proceeds from Amusements

4) Total Gross Proceeds (add lines 1, 2, and 3)

5) 2% Fee Computation (line 4 x .02)

6) 10% Penalty on Delinquent Fees ** (line 5 x .1 x # months late)

7) Total Hospitality Fees Due (add lines 5 and 6)

** Delinquent fees: a penalty of ten (10) percent of the unpaid balance for each month, or portion thereof, after the due date until paid.

MAKE CHECKS PAYABLE TO:

Town of Atlantic Beach
PO Box 5285
N. Myrtle Beach, SC 29597-5285

This return covers the entire month, and is delinquent** if not POSTMARKED by the US Postal Service ON or BEFORE the 20th day following the month's end.

Taxpayer’s Signature

Phone Number

Date

This information represents a true and accurate statement