

COUNTY OF ERIE
MONTHLY REPORT OF HOTEL ROOM RENTAL TAX

REPORT FOR _____ THRU _____ 20 ____	1.	Total Gross Room Receipts for Period _____
NAME OF FACILITY _____	2.	Less Receipts Exempted from Tax _____
ADDRESS _____	3.	Taxable Receipts _____
_____	4.	Amount of Tax @ 5% _____
MAILING ADDRESS (If different than above) _____	5.	Total Tax Due _____
_____		FEDERAL EMPLOYER ID # _____
_____		_____

I hereby certify that this return has been examined by me and that the information herein is true, and complete to the best of my knowledge and belief.

Operator _____
Signature Title

LODGING ROOM RENTAL TAX IS IMPOSED AT THE RATE OF 5% OF THE CONSIDERATION RECEIVED BY EACH OPERATOR OF A FACILITY IN ERIE COUNTY FROM EACH TRANSACTION OF RENTING A ROOM OR ROOMS. THE TAX IS TO BE COLLECTED BY THE OPERATOR OF EACH FACILITY FROM EACH PATRON WHO RENTS A ROOM. EACH OPERATOR IS REQUIRED TO FILE A TAX RETURN AND REMIT TAX DUE POSTMARKED ON OR BEFORE THE DAY OF THE MONTH SUBSEQUENT TO THE MONTH IN WHICH THE TAX IS LEVIED. IF THERE IS NOT TAX DUE FOR A GIVEN PERIOD, FILE RETURN INDICATING "NO TAX DUE" ON THE DUE LINE.

HOTEL ROOM RENTAL TAX
FEDERAL AND COMMONWEALTH EMPLOYEE AND LONG TERM GUEST
EXEMPTION STATEMENT

COLLECTION PERIOD _____ THROUGH _____ 20 ____

The following figure includes all Federal and Commonwealth Employee's and Long Term Guest Exemptions from the Erie County Hotel Room Rental Tax, if applicable.

Total Exempt Receipts _____
Hotel _____
Address _____
Hotel Operators Signature _____ Date _____

Hotel operators are obligated to maintain records for 3 years to support and identify this type of exemption, i.e. copies of the exemption certificates or other identifying documents.

REMITTANCE MUST BE POSTMARKED BY THE _____ OF EACH MONTH FOR THE PRIOR MONTH.
MAKE CHECK PAYABLE TO: "COUNTY OF ERIE GENERAL FUND"
MAIL TO: ERIE COUNTY FINANCE DEPARTMENT
ERIE COUNTY COURTHOUSE, 140 WEST STREET, ROOM #505
ERIE, PENNSILVANIA 16501
PHONE: 814/451-6354 FAX: 814/451-6454