

**RETURN OF HOTEL - MOTEL TAX**

MAIL TO:

**LAKE COUNTY HOTEL/MOTEL TAX DEPARTMENT**

105 Main St., Painesville, Ohio 44077

Hotel Name \_\_\_\_\_

Address \_\_\_\_\_

Hotel Manager \_\_\_\_\_

Period From \_\_\_\_\_ 20 \_\_\_\_\_ to \_\_\_\_\_ 20 \_\_\_\_\_

Lake County Hotel/Motel Certificate # \_\_\_\_\_

1	Gross Rents	\$	
2	Permanent Guests (Consecutive 30 day stay or more -attach explanation)		
3	Adjustments / Allowances / Discounts (attach explanation)		
4	Total Deductions (add lines 2 and 3)		
5	Taxable Rents (line 1 less line 4)		
6	3% of Taxable Rents		
7	Actual Tax Collected		
8	Tax Due (larger of line 6 or 7)		
9	Adjustments - Prior Period (attach explanation)		
10	Penalty for Late Filing (10%)		
11	Interest (Federal State Rate)		
12	Total Tax Due (sum of lines 8 thru 12)	\$	

"I hereby certify that the information and statements contained herein and in any schedules of exhibits attached are true and correct to the best of my knowledge."

Name \_\_\_\_\_ Title \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Notify the Lake County Hotel/Motel Tax Department of any change in ownership, name or address.

**Submit payment with two copies of this return.**

**Make checks payable to: Lake County Hotel/Motel Tax Department  
(440) 350-5580**

As Provided For in O.R.C.