

CHATHAM COUNTY , GEORGIA  
MONTHLY RETURN - HOTEL/MOTEL TAX COLLECTIONS

(Revised March 1, 2009)

IMPORTANT: This return must be filed and taxes paid by the 20<sup>th</sup> of the month following the month for which the tax is due.

MAIL RETURN AND TAX PAYMENT TO: CHATHAM COUNTY FINANCE DEPARTMENT  
POST OFFICE BOX 9297  
SAVANNAH, GEORGIA 31412  
(912) 652-7900

Return for the month of \_\_\_\_\_ 20 \_\_\_\_\_ Date return filed \_\_\_\_\_

Business Name \_\_\_\_\_

Business Address \_\_\_\_\_ Telephone No. \_\_\_\_\_

Number Lodging Rooms \_\_\_\_\_ Georgia Sales Tax Number \_\_\_\_\_

This report includes all excise taxes collected for Chatham County during the above stated month upon the furnishing for value to the public of any room or rooms, lodgings or accommodations, provided that no such tax shall be levied or collected upon the sale or charges for any rooms, lodgings or accommodations furnished for a period of more than thirty (30) consecutive days, or for the use of meetings.

1. Total charges for lodgings or accommodations and meeting rooms \$ \_\_\_\_\_
2. Deduct charges for accommodations furnished for a period of more than thirty consecutive days. ( \_\_\_\_\_ )
3. Deduct charges for meeting rooms ( \_\_\_\_\_ )
4. Deduct charges for lodging for persons who certify accommodations are furnished as result of destruction of their residence as result of fire or other casualty ( \_\_\_\_\_ )
5. Deduct charges for accommodations furnished for a period of one or more days for use by Georgia state or local governmental officials or employees on official business. ( \_\_\_\_\_ )
6. Net taxable charges for lodging or accommodations \$ \_\_\_\_\_
7. County excise tax - six percent (6%) of line 6 above \$ \_\_\_\_\_
8. Deduct three percent (3%) of Line 7, provided the amount due is not delinquent at the time of payment to the County. \$ \_\_\_\_\_
9. Net Tax Payable \$ \_\_\_\_\_
10. If return is postmarked after the 20<sup>th</sup> of the month in which payment is due, add five percent (5%) of Line 7 or \$5.00, whichever is greater. \$ \_\_\_\_\_
11. TOTAL AMOUNT REPORTED AND REMITTED TO CHATHAM COUNTY \$ \_\_\_\_\_

I certify that this return has been examined by me and is to the best of my knowledge and belief a true and complete return, made in good faith, for the period stated.

SIGNATURE

Please Print or Type Name

Title