

**Jefferson County Hotel Room Tax  
Quarterly Report**

Year 20\_\_

\_\_\_ 1<sup>st</sup> Quarter \_\_\_ 2<sup>nd</sup> Quarter \_\_\_ 3<sup>rd</sup> Quarter \_\_\_ 4<sup>th</sup> Quarter

Establishment \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

Gross Receipts	
Less Permanent Resident Exemptions *	
Less Other Guest Exemptions*	
Adjustments +/- **	
Taxable Receipts	
3% Tax Collected	
Late Filing Fee (\$50.00)	
Late Payment Interest (.75% per month)	
Total Payment Due	

\* Establishment must be able to produce, upon request, any "Individual Exemption Applications" filed for Permanent Residents and other Exempted Guests.

\*\* Explanation required for any adjustments ( i.e. audit correction, etc.). Attach separate sheet if necessary.

This tax is to be collected by the operator of each facility for each room rental. Each business is required to file a tax return and remit any tax due on or before the 25<sup>th</sup> of the month following each calendar quarter. **Even if there is no tax due for any given quarter, a return, indicating "No Tax Due", must be filed.**

I certify that I am familiar with the Jefferson County Hotel Tax Rules and Regulations.

The undersigned Applicant hereby swears and affirms that the information above is true and correct. The undersigned understands that false statements herein made are subject to the penalties of 18 Pa. C.S.A. §4904, relating to unsworn falsification to authorities.

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

Make check payable to: *Jefferson County Treasurer* Phone: 814-849-1678  
*155 Main St, Room 212* E-Mail: treasurer@  
*Brookville, PA 15825* jeffersoncountypa.com

*Treasurer's Office Use Only*  
 Date Paid \_\_\_\_\_  
 Check # \_\_\_\_\_  
 Receipt # \_\_\_\_\_