

# LUMPKIN COUNTY HOTEL/MOTEL TAX REPORT FORM

**INSTRUCTIONS:** THIS REPORT MUST BE FILED AND THE TAX PAID **BY THE 20<sup>TH</sup> OF THE MONTH** FOLLOWING THE MONTH IN WHICH THE TAX WAS COLLECTED TO AVOID LOSS OF VENDOR'S COMPENSATION, AND THE ASSESSMENT OF PENALTIES AND INTEREST. A COPY OF YOUR CORRESPONDING MONTH'S GEORGIA DEPARTMENT OF REVENUE SALES AND USE TAX REPORT **FORM ST-3) MUST BE ATTACHED TO THIS REPORT** BEFORE IT CAN BE CONSIDERED COMPLETE.

BUSINESS NAME: \_\_\_\_\_

GEORGIA SALES TAX NUMBER: \_\_\_\_\_

LUMPKIN COUNTY BUSINESS LICENSE NUMBER: \_\_\_\_\_

THIS REPORT COVERS TAX COLLECTED DURING THE MONTH OF: \_\_\_\_\_, 20\_\_\_\_

## COMPUTATION OF AMOUNT TO BE REMITTED

Line 1 \$ \_\_\_\_\_ **Gross Rental Proceeds**

Line 2 \$ \_\_\_\_\_ **Less Exempt Proceeds** (Do not levy Hotel/Motel Tax for categories of occupants specifically listed as "exemptions" in Paragraph 6 of Lumpkin County Ordinance 89.2, as amended December 22, 2003. Attach an explanation of exemptions used to account for any amount entered on this line.)

Line 3 \$ \_\_\_\_\_ **Net Taxable Proceeds** (Subtract Line 1 from Line 2)

Line 4 \$ \_\_\_\_\_ **5% Lodging Occupancy Tax** (Line 3 times .05)

Line 5 \$ \_\_\_\_\_ **Less Vendor's 3% Compensation for Collection** (Line 4 times .03, or 0 if not paid By the 20<sup>th</sup> of the month.)

Line 6 \$ \_\_\_\_\_ **Tax due Lumpkin County** (Subtract Line 5 from Line 4)

**NOTE: REPORTS MUST BE RECEIVED BY OUR OFFICE  
BY THE 20<sup>th</sup> OF THE MONTH**

**POST MARKED DATE DOES NOT QUALIFY AS RECEIVED**

**AFTER THE 20<sup>TH</sup> ONLY A COMPLETED DELINQUENT HOTEL/MOTEL TAX FORM  
WILL BE ACCEPTED**

Please make check for amount on Line 9 payable to the **Lumpkin County Board of Commissioners** and forward with a copy of this report and your corresponding month's **Georgia Department of Revenue Sales and Use Tax Report (Form ST-3)** to:

**Lumpkin County Board of Commissioners, Attn: County Clerk, 99 Courthouse Hill, Suite H,  
Dahlonega, GA 30533. (706) 864-3742**

**STATEMENT: I DO HEREBY DECLARE UNDER PENALTY OF LAW THAT THE  
INFORMATION CONTAINED IN THIS REPORT IS TRUE AND CORRECT TO THE BEST OF  
MY KNOWLEDGE.**

DATE: \_\_\_\_\_ SIGNATURE: \_\_\_\_\_

TITLE: \_\_\_\_\_