**TOWN OF BATH**

271 Wilkes Street

Berkeley Springs, WV 25411

304-258-1102 townofbath@wvdsl.net

**HOTEL OCCUPANCY TAX REMITTANCE**

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Month of Remittance: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 202\_\_\_\_\_\_\_\_\_\_\_

 *(Due by the 15th of the following month)*

 Total Room Sales for Month $\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Less) Room Sales Exempted $\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Subtotal $\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 X\_\_\_\_\_\_\_\_\_\_\_\_\_6%

 **TOTAL TAX DUE $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Please make checks payable to: **Town of Bath**