

**City of Emeryville, CA  
Utility Users Tax Remittance Form**



**Business Information:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

RDS Account No.: \_\_\_\_\_

FEIN or SSN#: \_\_\_\_\_

Due Date: Must be postmarked on or before the 20th of the month for the preceding month's taxes to be considered timely filed and paid.

**File Online: [www.salestaxonline.com](http://www.salestaxonline.com) Free, Fast, Easy**

**Customer Service**



Toll Free Phone: (866) 240-3665  
Toll Free Fax: (855) 219-4338



Email: [support@muniservices.com](mailto:support@muniservices.com)  
Website: [www.revds.com](http://www.revds.com)  
Online Filing: [www.salestaxonline.com](http://www.salestaxonline.com)



City of Emeryville, CA UUT  
c/o MuniServices, LLC  
438 E Shaw Avenue Box 367  
Fresno, CA 93710

**Total Amount Remitted with This Return:**

\$ \_\_\_\_\_

**Make check payable to: Tax Trust Account**

**Filing Period Month:** \_\_\_\_\_ **Year:** \_\_\_\_\_

Complete a separate return for each filing period.

Muni Internal Code 9901	Type of Service	Gross \$ Charges	Allowable \$ Deductions*	Non-Standard \$ Adjustments**	Net Taxable \$ Charges (Gross Charges minus Deductions and Adjustments)	Tax Rate %	Gross Tax Due \$ (Net Taxable Charges multiplied by Tax Rate)
42-11	Wireless Telecom					5.5%	
43-11	Prepaid Wireless					5.5%	
46-11	Electric					5.5%	
49-11	Wired Telecom/VOIP					5.5%	
50-11	Gas					5.5%	
52-11	Other: (Please describe)					5.5%	
<b>Subtotal</b>							
<b>Add 15% penalty if filed or paid after the due date.</b>							
<b>Plus interest if filed or paid after the due date - Calculate at 0.75% per month</b>							
<b>Total Due (Subtotal + Penalties + Interest = Total Due)</b>							<b>\$</b>

\*Deductions: Taxes, Resale Sales, Exempt Accounts

\*\*Non-Standard Adjustments (Please describe): \_\_\_\_\_

**Sworn Statement:** Under penalties of perjury, I declare that I have examined this return and to the best of my knowledge and belief it is true, correct and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

\_\_\_\_\_  
Taxpayer's/Paid Preparer's Signature                      Date Signed                      Telephone                      Fax

\_\_\_\_\_  
Printed Name                      Email                      FEIN

**DISCLAIMER:** Please note that the administration and rate changes on the MUNISERVICES, LLC Advisory and MUNISERVICES, LLC tax forms are updated once the required information has been received, verified and validated in compliance with MUNISERVICES, LLC policy. Any information received before or after the publication of a MUNISERVICES, LLC Advisory or tax form will not be guaranteed to appear on said forms until all such requirements have been met. MUNISERVICES, LLC is not responsible for incorrect information and/or improper use of the information provided. All updates are completed on a timely basis once the requirements have been met. For the most current MUNISERVICES, LLC administration and/or rate information provided, please visit our website at [www.revds.com](http://www.revds.com).

**Returned Check Disclaimer:** Effective July 1, 2010, each returned item received by MUNISERVICES, LLC due to insufficient funds will be electronically represented to the presenters' bank no more than two times in an effort to obtain payment. MUNISERVICES, LLC is not responsible for any additional bank fees that will accrue due to the resubmission of the returned item. Please see the full returned check policy at [www.revds.com/taxpayer/return-check-disclaimer](http://www.revds.com/taxpayer/return-check-disclaimer).