

City of Weatherford, TX c/o Avenu  
Attn: TX Hotel Occupancy Tax  
PO Box 830725  
Birmingham, AL 35283-0725



# Hotel Occupancy Tax City of Weatherford, TX

Phone: (866) 240-3665

Fax: (844) 528-6529

Email: [supportmuni@avenuinsights.com](mailto:supportmuni@avenuinsights.com)

Website: [www.avenuinsights.com](http://www.avenuinsights.com)

Online Filing: [www.hoteltaxonline.com](http://www.hoteltaxonline.com)

ACH Debit and Credit Cards Accepted

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

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

\_\_\_\_\_

Account #: \_\_\_\_\_

### Total Amount Remitted with This Return:

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

#### **MAKE CHECK PAYABLE TO: TAX TRUST ACCOUNT**

Do not staple or tape payment to your return. Do not send cash.

Remit to: Hotel Occupancy Tax Dept. PO Box 830725 Birmingham, AL 35283-0725

**Instructions:** Select the applicable filing period and complete the information below for your Hotel Occupancy Tax. If payment is mailed, the envelope must be postmarked on or before the due date for the applicable filing period to avoid additional penalties and/or interest. If you are filing for more than one filling period, please complete a separate return for each period.

January  February  March  April  May  June  July  August  September  October  November  December YEAR: 20\_\_\_\_

*Due Date: Must be postmarked on or before the last day of the preceding month's taxes to be considered timely filed.*

*(Example: October's taxes are due on or before November 30<sup>th</sup>)*

**Total room nights available:** \_\_\_\_\_  
(8038-31-80)

**Actual nights rented:** \_\_\_\_\_  
(8038-31-81)

1. Gross room receipts **before** exemptions: \$ \_\_\_\_\_  
(8038-30-11)

2. Minus legal exemptions:  
(a) Permanent residents: \$ \_\_\_\_\_

(b) Federal employees: \$ \_\_\_\_\_

(c) State of Texas, its agencies, institutions, boards or commissions: \$ \_\_\_\_\_

(d) Exemption certificate: \$ \_\_\_\_\_

(e) Total exemptions: \$ \_\_\_\_\_

**3. Total taxable room receipts (line 1 minus line 2e):** \$ \_\_\_\_\_

4. Total taxable room receipts times 7% (line 3 by .07): \$ \_\_\_\_\_

5. Penalty (if applicable): \$ \_\_\_\_\_

*10% applies if not filed by due date.*

*Additional 10% over the tax due if filed 30 days after due date.*

*Minimum penalty \$1.00.*

6. Interest (if applicable): \$ \_\_\_\_\_

*Interest due if tax not filed and paid 60 days from due date.*

*Calculate interest at 10% per annum.*

**7. Total Amount Due (sum lines 4, 5 and 6):** \$ \_\_\_\_\_

*Make check payable to "Tax Trust Account"*

I declare, under penalties prescribed in Section 5-6-6 of the City Code that the information contained in this document is true and correct to the best of my 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 Avenu Advisory and Avenu tax forms are updated once the required information has been received, verified and validated in compliance with Avenu policy. Any information received before or after the publication of a Avenu Advisory or tax form will not be guaranteed to appear on said forms until all such requirements have been met. Avenu 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 Avenu administration and/or rate information provided, please visit our website at [www.avenuinsights.com](http://www.avenuinsights.com). **Returned Check Disclaimer:** Effective July 1, 2010, each returned item received by Avenu due to insufficient funds will be electronically represented to the presenters' bank no more than two times in an effort to obtain payment. Avenu 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.avenuinsights.com](http://www.avenuinsights.com).  
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