



April 2020

Ashtabula County Lodging Tax report



Mail to: Board of Commissioners, 25 West Jefferson St., Jefferson, Ohio 44047

Or Email (attachment) to jjarco@ashtabulacounty.us

Assistance: (440) 576-3748 / <http://www.ashtabulacounty.us/626/2017-Lodging-Tax-forms>

Make checks payable to:

Ashtabula County Commissioners

The county's lodging tax rate is 5 percent and must be collected from every paying guest(s) per room/ per night. Failure to collect the tax does not relieve the operator of responsibility for paying it.

| | |
|---|--|
| Establishment name: | This report covers the period April 1 to April 30, 2020 Report and payment are due by May. 31, 2020. A penalty of 10 percent will be assessed on tax not paid by May. 31, 2020. Any penalty due will be deducted from the payment remitted; unpaid taxes are carried over as due items. |
| Address: | |
| City, village or township: | |
| Owner name: | |
| Owner address: | |
| Owner email: | |
| Property VRBO or Home Away ID # | |
| 1. How many room nights were sold during April 1 to April 30, 2020? | |
| 2. Enter the gross rents paid by guests during: April 1 to April 30, 2020 | \$ |
| 3. Enter legally qualifying exemptions and attach certificates (rare): | \$ |
| 4. Taxable rents, subtract line 3 from line 2: | \$ |
| 5. Multiply line 4 by 5 percent (.05), enter here: | \$ |
| 6. Tax and penalties due from prior months: | +\$ |
| 7. Penalty if filing after May. 31, 2020 (penalties deducted first): | +\$ |
| 8. Sum of lines 5-7. This is the amount due with this report: | \$ |
| 9. Amount enclosed: | \$ |
| 10. Amount unpaid (carry over to next report with 10 percent penalty): | \$ |

SPECIAL CONDITIONS: *If any of these special conditions apply for this reporting period, please check the appropriate box.*

1. This is my last return for the operating season of 2020. I will resume transient guest service beginning _____ and resume filing reports.
2. The property was converted to a full-time occupancy rental (used by the same occupant(s) for 30 days or longer. I plan to resume transient guest rentals: _____.
3. During the reporting period, family or guests who did not pay for consideration occupied the property. No income was realized from these room nights.
4. The following special situation existed:

Under penalty of perjury I hereby certify the information herein reported is true and that I possess supporting documents to the same. I understand these documents may be audited.

Signed, operator **Print name** **Date**