



**TREASURER/TAX COLLECTOR  
JUSTIN BIRTWHISTLE**

Tuolumne County Administration Center  
2 South Green Street  
Sonora, California 95370  
Phone (209) 533-5544

**TRANSIENT OCCUPANCY TAX RETURN (TOT)**

CERTIFICATE NO:	REPORTING PERIOD:
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1. Enter gross rent for individual months in calculating quarterly gross rent (line 1)
2. Even if there is no tax, a return must be filed with the tax collector
3. Return is delinquent if not postmarked on the last day of the month following the close of each Calendar quarter
4. Change of address or ownership must be reported immediately to the tax collector
5. Upon cessation of business for any reason, the return and payments are due immediately
6. Mail this completed form along with remittance payable to Tuolumne County Tax Collector  
PO Box 3248, Sonora, CA 95370

1. **Gross rent for occupancy of rooms:** \$ \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
**Total for Quarter: \$** \_\_\_\_\_

2. **Less Rent for occupancy by permanent residents** \_\_\_\_\_  
 (Those who rent for a period exceeding 30 consecutive calendar days)

3. **Total Taxable Rent** (Total for Quarter minus line 2) \_\_\_\_\_

4. **Total Tax = 10%** (.10 x line 3) \_\_\_\_\_

5. **Penalties 10%** (.10) of line 4 if paid within 30 days after delinquent date; 20% (.20) of line 4 if paid more than 30 days after delinquent date \_\_\_\_\_

6. **Interest ½ of one percent** (.005) for each month or fraction of a month after delinquent date \_\_\_\_\_

7. **Total TOT tax, penalty and interest:** (lines 4,5,6) \$ \_\_\_\_\_

I DECLARE UNDER PENALTY OF PERJURY THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF THAT STATEMENTS ARE TRUE AND CORRECT

{Name and address of owner}
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Signed \_\_\_\_\_  
 Title \_\_\_\_\_  
 Date \_\_\_\_\_  
 Phone \_\_\_\_\_