



CITY OF BEND

Phone: 541-388-5509 Email: roomtax@bendoregon.gov
Website: www.bendoregon.gov/roomtax

| OFFICE USE ONLY | |
|-----------------|--|
| Date received | |
| Receipt number | |

Transient Room Tax Remittance Form

**To report multiple locations, please use the Multiple Locations Reporting Form located on our website.

| Account Information | | | |
|-------------------------------------------|--------------|---------------|-----------------|
| Name of property/business (including DBA) | | | Reporting month |
| Property address | | | |
| Name of transient room tax contact | Phone number | Email address | Reporting year |

FORM DUE MONTHLY BY THE 15TH FOR THE PRECEEDING MONTH, EVEN IF NO GROSS RENT WAS RECEIVED

| | | |
|-----------------------------------------------------------------|-----|----|
| 1. Gross rent..... | 1. | \$ |
| 2. Allowable exemptions: | | |
| 2a. Monthly rent (greater than 30 consecutive days)..... | 2a. | \$ |
| 2b. Rent from authorized Federal employees..... | 2b. | \$ |
| 2c. Rent from transient lodging intermediaries..... | 2c. | \$ |
| 2d. Other exemptions (please explain)..... | 2d. | \$ |
| 3. Total allowable exemptions (sum of lines 2a through 2d)..... | 3. | \$ |
| 4. Taxable rent (line 1 minus line 3)..... | 4. | \$ |
| 5. Tax rate..... | 5. | |
| 6. Tax due (line 4 multiplied by line 5)..... | 6. | \$ |
| 7. Excess tax collected..... | 7. | \$ |
| 8. Total tax collected (line 6 plus line 7)..... | 8. | \$ |
| 9. Rebate rate for administrative costs..... | 9. | |
| 10. Rebate amount (line 8 multiplied by line 9)..... | 10. | \$ |
| 11. Net tax due (line 8 minus line 10)..... | 11. | \$ |
| 12. Penalties..... | 12. | \$ |
| 13. Interest..... | 13. | \$ |
| 14. Previous balance..... | 14. | \$ |
| 15. TOTAL DUE (sum of lines 11 through 14)..... | 15. | \$ |

I declare, under penalty of false swearing, that to the best of my knowledge, the information herein is true, correct, and complete.

| | | |
|-----------|-------|------|
| Signature | Title | Date |
|-----------|-------|------|

Print completed form and mail with payment to: Finance Dept/TRT | PO Box 1024 | Bend, OR 97709

MAKE CHECK OR MONEY ORDER PAYABLE TO CITY OF BEND. To pay by Visa or MasterCard email your form to roomtax@bendoregon.gov and call in your payment to 541-388-5515.

SEE PAGE 3 FOR ADDITIONAL INSTRUCTIONS

| | |
|-------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Line 1 | Gross Rent: Enter the gross rent received for occupancy in temporary lodging for the month. "Rent" means the amount paid or payable by an occupant for the occupancy of space in temporary lodging. If a separate fee is charged for services, goods or commodities and that fee is optional, that fee is not included in rent. Rent includes all fees and assessments based on the number of occupants (human and/or pets) for which payment is not considered optional to the occupant. |
| Lines 2a-2d | Exemptions/Exclusions: Enter any gross rents that are not subject to tax or that are excluded from your total gross rents. The most common exemptions and exclusions are: |
| 2a | Monthly rent: A dwelling unit that is leased or otherwise occupied by the same person for a consecutive period of 30 days or more. |
| 2b | Rent from authorized Federal employees: The United States or an employee of the federal government while on federal business. This exemption does not include state or local government employees. |
| 2c | Rent from transient lodging intermediaries: Gross receipts from transactions with transient lodging intermediaries ie: Online Travel Companies. Do not include transactions for which you collected the tax directly from customers, or transactions for which you received the tax from intermediaries. Complete and attach page 2, Report of Gross receipts from transient lodging intermediaries. |
| 2d | Other exemptions: Please explain |
| Line 3 | Total Exemptions/Exclusions: Sum of all exemptions. |
| Line 4 | Taxable Rent: Subtract Total Exemptions (line 3) from Gross Rent (line 1). |
| Line 5 | Current City of Bend Tax rate: 10.4% |
| Line 6 | Tax due: Multiply Taxable Rent (line 4) by 10.4% (line 5) |
| Line 7 | Excess Tax: Enter any excess tax collected from occupants. |
| Line 8 | Total Tax Collected: Enter the amount of tax collected or required to be collected according to the lodging property's books and records (This amount should total line 6 plus line 7). Please explain any differences. |
| Line 9 | Current rebate rate for administrative costs: 5% |
| Line 10 | Rebate for Administrative Costs: Multiply Total Tax Collected (line 8) by 5% (line 9) |
| Line 11 | Net Tax Due: Subtract Rebate for Administrative costs (line 10) from Total Tax Collected (line 8) |
| Line 12 | 10% Penalty - 30 Days or Less Past Due: If applicable, multiply Net Tax Due (line 11) by 10%. If you fail to file the return and remit payment by the 25th day of the month following collection of the tax, a penalty of 10% of the tax amount is due. 25% Penalty – Greater than 30 Days Past Due: If applicable, multiply Total Tax Due (line 11) by 25%. If the return and remittance are submitted more than 30 days past the due date, the penalty increases by another 15% of the tax for a total penalty of 25% of the tax. |
| Line 13 | Interest: If applicable, multiply Total Tax Due (line 11) by 1%. If the return and remittance are not submitted by the due date, in addition to the penalties, interest of 1% (per month) of the tax is owed. |
| Line 14 | Previous Balance - Adjustment for Prior Shortage or Overage: Use this line to reflect any shortages or overages of prior periods. |
| Line 15 | Total Tax Remittance: Add and/or subtract, as appropriate, Net Tax Due (line 11), Penalties (line 12), Interest (line 13), and Previous Balance (line 14). Remit this amount to the City of Bend. |