

TRANSIENT OCCUPANCY TAX (TOT) & PGHID RETURN TO CITY OF PACIFIC GROVE

FOR MONTH(S) OF: _____

1. Total Transient Rents charged and received for period :	\$
2. Less exemptions (attach documentation):	\$
3. Net amount taxable by City of Pacific Grove (line 1 minus line 2):	\$
4. Tax (TOT) due (10% of line 3):	\$
5. Penalties (if any):	\$
6. Total tax and penalties due (line 4 plus line 5):	\$
7. Number of rooms occupied during period:	#
8. PGHID assessment due: \$2 per room night (limited service rooms); \$4 per room night (full service rooms)	\$
9. Total payment: TOT and PGHID assessment (line 6 plus line 8)	\$

I declare under penalty of making a false statement that, to the best of my knowledge and belief, the statements made herein are correct and true.

ESTABLISHMENT NAME: _____

SIGNED: _____

PRINTED NAME: _____

TITLE: _____

**THIS FORM IS YOUR PACIFIC GROVE CITY TRANSIENT OCCUPANCY TAX (TOT) RETURN
AND HOSPITALITY IMPROVEMENT DISTRICT (HID) ASSESSMENT RETURN.**

YOU ARE REQUIRED TO FILE THIS RETURN AND PAY THE TAX AND ASSESSMENT PURSUANT TO CHAPTERS
6.09 AND 6.54 OF THE PACIFIC GROVE MUNICIPAL CODE.

This return, accompanied by remittance of taxes, penalties (if any) and assessments imposed, must be filed on or before the expiration of 30 days from the close of the tax period.

A penalty of 10% per month shall be added to the taxes not paid within the required time. Interest shall also be added at the rate of ½ of 1 percent per month or fraction thereof.

Mail remittance to:

City of Pacific Grove

Attn: Finance Department

300 Forest Avenue

Pacific Grove, CA 93950