



# City of Johnson City, Texas Hotel Occupancy Tax (HOT) Report

HOT Taxpayer Number:	Filing Period:	Due Date:
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Taxpayer Name and Mailing Address:  
(Make any necessary name changes below)

**IMPORTANT**

If any location shown is no longer in business, write the location number and the date you went out of business.  
Location No.: \_\_\_\_\_ OOB Date: \_\_\_\_\_

***A report must be filed even if no tax is due.***

1. No. of Rooms	2. Location Trade Name and Address	3. Location Number	4. Total Dollar Amount of Receipts	5. Total Taxable Receipts

6. Total room receipts (dollars) for ALL locations (Item 4 from this and all supplemental pages)-----6. \_\_\_\_\_
7. Total taxable receipts (dollars) for ALL locations (Item 5 from this and all supplemental pages)----7. \_\_\_\_\_
8. Total tax due (7% of Item 7)-----8. \_\_\_\_\_
9. Penalty (See below)-----9. \_\_\_\_\_

Any person failing to file a required report or to pay the City the tax imposed by Code of Ordinances Article 11.04 when due, will be assessed a five percent (5%) penalty on the amount of tax then due. If such report or tax is 30 days or more late, an additional five percent (5%) penalty will be imposed on the tax due for a maximum penalty of ten percent (10%); provided, however, that the minimum penalty amount imposed under this Section shall not be less than \$1.00. If the penalty due under this Section is not paid, such penalty shall incur simple interest at six percent (6%) per annum beginning on the 60th day from the date the tax was due.

10. Interest -----10. \_\_\_\_\_
11. **TOTAL AMOUNT DUE AND PAYABLE** (Item 8 plus Item 9 plus Item 10)-----11. \_\_\_\_\_

**Mail amount in Item No. 11 payable to  
the City of Johnson City**

Attn: City Secretary  
P.O. Box 369  
Johnson City, TX 78636

**I declare that the information in this document and  
any attachments is true and correct to the best of  
my knowledge and belief.**

	Date
Daytime Phone: _____	