

CITY OF CARLSBAD TRANSIENT OCCUPANCY TAX RETURN (TOT)

CARLSBAD TOURISM BUSINESS IMPROVEMENT DISTRICT RETURN (CTBID) CARLSBAD GOLF LODGING BUSINESS IMPROVEMENT DISTRICT RETURN (CGLBID)

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NAME OF BUSINESS						
BUSINESS ADDRESS			MAILING ADDRESS			
MONTH ENDED	mm/dd/yyyy	DUE DATE		TODAY'S DATE		
Note that monthly paymen which the taxes are co			efore the last day of the the first day of each mo			
1. NUMBER OF DAYS EACH UNIT/HOTEL ROOM IS AVAILABLE (Multiply the # of units/hotel rooms by the # of days in the month each unit is available) 2. NUMBER OF DAYS EACH UNIT/HOTEL ROOM IS OCCUPIED (Multiply the # of units/hotel rooms by the # of days in the month each unit is occupied) 3. TRANSIENT RENT RECEIPTS (minus any funds collected by Airbnb) 4. CTBID ASSESSMENT (line 3 multiplied by 2%) (minus any funds collected by Airbnb) 5. CGLBID ASSESSMENT (line 3 multiplied by 1%) Note this is an optional BID. Enter X in the box if part of CGLBID: 6. TRANSIENT TAX (line 3 multiplied by 10%)						
SUBTOTAL (Add line		,		•		
7. PENALTY (lines 4	4 thru 6 multiplied by 10 ment is made after du			CTBID Penalty CGLBID Penalty TOT Penalty		ı
8. PENALTY (lines 4 thru 6 multiplied by 10%) If beyond 30 days delinquent, additional 10% penalty.				CTBID Penalty CGLBID Penalty TOT Penalty		ı
 INTEREST (lines 4 thru 6 multiplied by 0.04928% multiplied by delinquent) 1.5% Interest per month @ 0.04928% Daily Interest delinquency. 			•	CTBID Interest CGLBID Interest TOT Interest		,
TOTAL PENALTIES	& INTEREST (Add lii	nes 7 thru 9)				
TOTAL BALANCE DUE (Add Subtotal plus Total Penalties & Interest)						
I hereby certify that this return has been examined by me and to the best of my knowledge and belief it is a true, correct and complete statement made in compliance with the provisions of the Carlsbad Municipal Code.						
Print Name:				Title:		
Signature:				Date:		
Email Address:				Telephone:		