



CITY OF EVANSTON

HOTEL-MOTEL AND VACATION RENTAL TAX RETURN STATEMENT

**Statement of Tax Receipts under the Provisions of City of Evanston,
Municipal Code, Title 3, Chapter 2, "Hotel-Motel and Vacation Rental Tax"**

This return must be filed on or before the 20th day of the calendar month, succeeding the end of the monthly filing period. If the return is filed late, a penalty of 10% per month or part thereof is assessed. A single check may be issued for multiple locations; however, a separate tax statement is required for each store location and month. **EXEMPTION:** The tax imposed shall not apply to the renting, leasing, or letting of accommodations in a hotel or motel to permanent residents. A "permanent resident" means any person who occupies or has the right to occupy any room or rooms in the hotel or motel for at least 30 consecutive days. If a hotel or motel provides accommodations for both permanent residents and other guests, the rental obtained from permanent residents shall not be included in the computation of the tax due.

Please mark an (X) on the appropriate month for payment:

- | | | | |
|-----------------------------------|--------------------------------|---|-----------------------------------|
| <input type="checkbox"/> January | <input type="checkbox"/> April | <input type="checkbox"/> July | <input type="checkbox"/> October |
| <input type="checkbox"/> February | <input type="checkbox"/> May | <input type="checkbox"/> August | <input type="checkbox"/> November |
| <input type="checkbox"/> March | <input type="checkbox"/> June | <input checked="" type="checkbox"/> September | <input type="checkbox"/> December |

Corporation / Partnership Name: _____

DBA: _____

Address of Business: _____

1) Gross Hotel – Motel Rental Receipts	
2) Exemptions	
3) Taxable receipts (subtract line 1 from 2)	
4) Tax Amount Due: (Multiply line 3 by 0.075)	\$
<i>*If late, complete lines 5 through 8</i>	
5) Late Fee Percentage: (Multiply line 4 by 0.10)	
6) Month(s) Delinquent	
7) Total Penalty Due: (Multiply lines 5 and 6)	\$
8) Total Tax and Penalty Due: (Add lines 4 and 7)	\$

Under penalties as provided by law, the undersigned attests that this tax return is true and accurate to the best of his/her knowledge and belief, and is taken from the books and records of the business for which this is filed.

Print Name of Person Preparing Return: _____

Title: _____

Phone Number: _____

Signature: _____

Date: _____

Return this completed form along with a check for the tax due to:

Internal Use only:
100.15.1560.51550

The City of Evanston
Lorraine H. Morton City Hall,
ATTN: City Collector's Office
909 Davis Street
Evanston, IL 60201

www.cityofevanston.org/business/home-rule-taxes