WHITE COUNTY BOARD OF COMMISSIONERS 1235 Helen Highway, Cleveland, GA 30528 706-865-2235				
Hotel/Motel Monthly Tax Report				
Business Name:	Month Reporting For:	GA Sales Tax #:		
Business Address:	1			
Rental Management Companies shall eith to the White County Clerk's Office, or pro Office. (Please list all 911 addresses of the Conforming Lots, Buildings, and Use – Section 704 Important: This report must be filed and the tax p to avoid loss of vendor's compensation and the as	vide a separate lodging tax form for cabins on the back of this page) - Short-term Rental Requirements (e) (4) raid by the 20 <sup>th</sup> of the month following the	e month in which the tax was collected in	nty Clerk's s, Article IV – Non- n order	
Department of Revenue Sales and Use Tax Report	(Form ST-3) must be attached to this repo	ort.		
			TOTALS	
1. Gross Rental Proceeds				
2. Less Exempt Portion of Proceeds (Do not levy Hotel/Motel tax for (a) Accommodations furnished for a period of				
of more than 30 consecutive days (b) Use as a mee	eting room (c) Accommodations for use b	y Georgia State and Local Government		
Officials or employees when traveling on official business (A Hotel/Motel tax exemption request form issued from such				
Government must be provided to you when claiming this exemption).				
3. Net Taxable Proceeds (Line 1 less Line 2)				
4. Hotel/Motel Tax (8% of Line 3)				
5. Less 3% of Tax (Line 4) as collection fee (If Timely by 20th day of the month)				
6. Tax Due White County (Line 4 less Line 5)				
7. Specific Penalty – 5% of the tax due or \$5.00, whichever is greater for each 30 days or fraction thereof of				
delinquency, not to exceed 25% or \$25.00 in the aggregate, whichever is greater.				
8. Interest on Late Payment75% per month or fraction thereof compounded from due date until paid				
9. Total Tax, Penalty and Interest				
*Make check payable to White County Commissio Department of Revenue Sales and Use Tax Report			jia	
Date:	-	Please check if you need more report f	orms 🗆	
Signature/Title:				
I do hereby declare under penalty of law that the information contained in this report is true and correct to the best of my knowledge.				
Internal Use Only: Received By / Date Planning Department Sign Off:				

List all 911 addresses for each property that you are reporting Gross Revenues for:

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