

**Hotel Motel Tax Remittance Form**

Village of Shorewood

One Towne Center Blvd.

Shorewood, IL 60404

Phone (815) 207-4631 Fax (815)741-7715



**Computation of Tax:**

- 1. Gross Rental and Leasing Charges \$ \_\_\_\_\_
- 2. Deductions of receipts from permanent residents:  
(A permanent resident is defined as one who occupies  
the premises for at least 30 consecutive days) \$ \_\_\_\_\_
- 3. Taxable Receipts (Line 1 minus line 2) \$ \_\_\_\_\_
- 4. Tax (5.00% of line 3) \$ \_\_\_\_\_
- 5. Penalty (2.00% per month of unpaid tax) \$ \_\_\_\_\_
- 6. Total Tax (Line 4 plus line 5) \$ \_\_\_\_\_

**Quarterly Tax Period Covered (Check One)**

Jan – March \_\_\_\_\_ Apr – June \_\_\_\_\_ July – Sept \_\_\_\_\_ Oct – Dec \_\_\_\_\_

Calendar Year: 20\_\_\_\_\_

**Hotel/Motel for which tax is remitted:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Under penalties provided by Shorewood municipal code 3-2-2-G, the undersigned certifies that this return is true and accurate and is taken from the financial records of the business for which this return is filed.

\_\_\_\_\_  
Signature Title Date

This form and payment are due on the month end following the close of the calendar quarter to:

Village of Shorewood attn.: Finance Director  
One Towne Center Blvd  
Shorewood, IL 60404