

VILLAGE OF ARLINGTON HEIGHTS  
Finance Department  
33 S. Arlington Heights Road  
Arlington Heights, Illinois 60005

**HOTEL-MOTEL OCCUPANCY TAX RETURN**

**Taxes must be paid on or before the 30th day of the month immediately following the month ending.**

Statement of Tax Receipts under the Provision of Ordinance #74-110, #77-29, #80-139 and #96-003  
of the Municipal Code of Arlington Heights

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Name of Hotel/Motel \_\_\_\_\_ Address of Hotel/Motel \_\_\_\_\_

Name of Operator(s) \_\_\_\_\_ Principal Office Address \_\_\_\_\_

Name of Owner \_\_\_\_\_ Principal Office Address \_\_\_\_\_

Covering Calendar Month of \_\_\_\_\_ 20 \_\_\_\_\_

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1.	Gross Receipts	\$ _____
2.	Net Receipts	\$ _____
3.	Amount of Tax (5% of Line 2)	\$ _____
4.	Less 3% of Line 3	\$ _____
5.	<b>TOTAL TAX DUE</b>	<b>\$ _____</b>

Place where records are kept \_\_\_\_\_

For Computation of Penalty:

1.	Tax Due	\$ _____
2.	Amount Paid	\$ _____
3.	Amount Delinquent	\$ _____
4.	Interest and Penalties Section 7-1506	\$ _____
5.	<b>TOTAL</b> (Including Interest and Penalty) (Add Lines 3 and 4)	<b>\$ _____</b>

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**UNDER PENALTIES PROVIDED BY ORDINANCE,** I hereby affirm that the statements herein contained are taken from the books and records of the above establishment and are true and correct to the best of my knowledge.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name - Please print or type

\_\_\_\_\_  
Title

Return one (1) copy with your remittance to the Finance Director - Village of Arlington Heights - 33 S. Arlington Heights Road -  
Arlington Heights, Illinois 60005