



# City of North Pole TOBACCO TAX Remittance Form

Payments must accompany tax submission for a complete filing. Tax submissions are for the previous sales month and are due by the last day of the following month by 5 pm (i.e., June sales are filed and paid by July 31). Zero sales months still require a filing to be completed.

**Mail To:** THE CITY OF NORTH POLE  
125 SNOWMAN LANE  
NORTH POLE, AK 99705

**DATE:** \_\_\_\_\_

**BUSINESS LICENSE NUMBER:** \_\_\_\_\_

**Phone:** 907-488-8536

**BUSINESS NAME:** \_\_\_\_\_

Check if your physical address or phone number has changed or the business is closing. Note changes on the back of this form. New owners must apply for a business license.

1. Gross Sales for **Month Ending:** \_\_\_\_\_ \$ \_\_\_\_\_
2. **Credit Card Service Fees** \$ \_\_\_\_\_
3. **Gross Taxable Sales** \$ \_\_\_\_\_  
(Subtract lines two and three from line one)
4. **Sales Tax Due (10% of line four)** \$ \_\_\_\_\_
5. **Fees:** (Calculate the following charges based on line five)
  - a. **Returns 1 - 29 days past due** add \$25 or .00875 of sales tax due, whichever is greater, in addition to the total amount due. Incomplete returns add a penalty of \$15. \$ \_\_\_\_\_
  - b. **Returns 30- 60 days past due** add \$50 or .00875 of sales tax due, whichever is greater, in addition to all previous fees and penalties. Incomplete returns will incur an additional penalty of \$15. \$ \_\_\_\_\_
  - c. **Returns 61 days past due** will incur a reoccurring monthly fee of \$50 in addition to all previous fees, and interest. Sellers failing to file complete returns & full remittance will be subject to revocation of their business license and a lien against the seller's property will be administered. \$ \_\_\_\_\_
6. **TOTAL FEES DUE** \$ \_\_\_\_\_
7. **TOTAL TAX/FEES DUE** \$ \_\_\_\_\_  
(Add lines 5,6 & 7 to show the amount here)

*Interest at the rate of 10.5% per annum, applied monthly, shall accrue on all delinquent taxes & fees starting from the due date until paid in full.*

**I DECLARE, SUBJECT TO THE FEES PRESCRIBED, THAT THIS RETURN (INCLUDING ACCOMPANYING STATEMENTS) HAS BEEN EXAMINED BY ME, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IS A TRUE, CORRECT, AND COMPLETE RETURN.**

**DATE:** \_\_\_\_\_

**OWNER/AGENT:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_