SUSQUEHANNA COUNTY HOTEL ROOM RENTAL TAX QUARTERLY RETURN

Updated 3/13/2025

<u>INFORMATION & INTSRUCTIONS</u> This tax is to be collected by the operator of each facility from each patron who rents a room. Each operator is required to file a quarterly tax return & remit any taxes due to Susquehanna County on or before the 25th day of the month following the end of the guarter for which the tax is levied. If there is no income & no tax due for a given month, indicate "\$-0-" on the gross receipts line & "NO TAX DUE" on the total tax payment due line. Always include your certificate number. Keep a copy of this completed form for your records. The signed, original return must accompany your remittance check and any supporting documents. This form must be signed and dated for it to be valid. Checks for payments should me made payable to "Susquehanna County Treasurer" and mailed to: Susquehanna County Treasurer P O Box 218 Montrose, PA 18801. Please call (570) 278-4081 if you have any questions.

Business Name:	Certificate #		
Business Address (Physical Address):			
Mailing Address (if different)			
Phone:			
REPORTING YEAR:	MONTH:	MONTH:	MONTH:
Gross Receipts			
Less Exempt Receipts – 30+ Days			
Total Taxable Receipts			
3% Tax Collected			
Tax Due			
Late Fee if applicable @ .75% Per Month			
Total Payment Due			
		Total Check Amount	
*NEW effective 1/1/2025 Check this box if your tax is complicable monthly reports generated party below (i.e. Air BNB, VRBO, V	erated by the third-	<mark>party vendor.</mark> Please indicato	e the name of the third
I hereby certify that this return has bee complete to the best of my knowledge.	en examined by me	and that the information her	rein is true, correct and
Signature		Date:	
Print Name:		Title:	



Office Use Only:

Recd:	Chk #:	Amt:	HID:
Recpt #:	Reconciled:	Scanned:	