



**VILLAGE OF MOUNT PROSPECT**

50 South Emerson Street  
Mount Prospect, IL 60056

**HOTEL/MOTEL OCCUPANCY TAX RETURN**

For Month Ending \_\_\_\_\_, 20\_\_

Statement of Tax Receipts under the Provision of Ordinance No. 4293 of the Municipal Code of the Village of Mount Prospect.

LEGAL BUSINESS NAME \_\_\_\_\_ DBA \_\_\_\_\_

ADDRESS \_\_\_\_\_

\_\_\_\_\_

PHONE \_\_\_\_\_

**COMPUTATION OF TAX**

1.	GROSS ROOM RENTAL RECEIPTS	\$ _____
2.	GROSS TAX (6% OF LINE 1)	\$ _____
3.	LESS COLLECTION FEE (2% OF LINE 2)	\$ _____
4.	NET TAX TO BE REMITTED (LINE 2 LESS LINE 3)	\$ _____
5.	INTEREST (1% PER MONTH IF LATE)	\$ _____
6.	PENALTY (5%) LATE RETURN	\$ _____
7.	PENALTY (5%) DELINQUENT TAX	\$ _____
8.	TOTAL TAX DUE	\$ _____

Remittance Instructions

Please remit this form and the amount indicated on line 8 above. Checks should be made payable to: VILLAGE OF MOUNT PROSPECT.

The Village must receive your remittance by the 15<sup>th</sup> day of the month immediately following the month when the taxes were collected. If the 15<sup>th</sup> of the month falls on a Sunday or holiday when Village Hall is closed, payment must be received by the next business day. A payment sent by mail must be postmarked no later than the 15<sup>th</sup> of the month. If the 15<sup>th</sup> of the month falls on a Sunday or national holiday when the U.S. Postal Service is closed, the remittance must be postmarked by the next business day.

If the return is filed late, interest of one-percent (1%) per month will be added to the tax liability. Also, you will be liable for a five-percent (5%) penalty for failure to file a return and an additional five-percent (5%) penalty will be assessed for failure to pay the tax by the due date.

Affirmation

Under penalties as provided by law, the undersigned attests that this tax return is true and accurate to the best of his/her knowledge and belief, and that the statements contained herein are taken from the books and records of the business for which this is filed.

\_\_\_\_\_  
Signature of Tax Payer

\_\_\_\_\_  
Name of Business Owner (Print/Type)

\_\_\_\_\_  
Title

\_\_\_\_\_  
IBT #

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Date

PLEASE NOTIFY THE VILLAGE OF MOUNT PROSPECT OF ANY CHANGE IN OWNERSHIP.