



City of Norfolk, Virginia
Blythe A. Scott, Commissioner of the Revenue
Mail to: PO Box 2260 Norfolk, VA 23501-2260
Make checks Payable to: Norfolk City Treasurer
ROOM TAX REPORT

This Return must be filed, and payment received, by the 20th of the month following the calendar month that the Taxes were collected.

Month: _____ Year: _____

ACCOUNT: _____ - _____

Name & Address:

TOTAL # OF ROOMS RENTED

Total Tax @ \$3.00/room/night

PENALTY (10.00% of Tax Amount)

INTEREST (10.00% per annum tax)

TOTAL TAX DUE

I HEREBY CERTIFY THAT THE FIGURES SHOWN ON THIS FORM ARE CORRECT: _____



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