



# CITY OF BELMONT

## Transient Occupancy Tax (TOT) Return

Every person providing transient lodging for remuneration in Incorporated City of Belmont must collect a tax of ten percent (10%) on the rent paid, unless that rent qualifies for exclusion or exemption. All allowable exclusions and exemptions must accompany this return form. This tax is due and payable to the City, on or before the last day of the month following the close of period. For failure to pay by the amount prior to the due date, the lodging provider is subject to paying a penalty and interest on the tax due. The initial penalty is ten percent (10%) of the amount due; further delinquency is subject to an additional penalty of ten percent (10%). The interest rate is one percent (1%) per month or fraction thereof. *Change of ownership, suspension, or disposal of business must be reported to us immediately.*

FILE ONLINE AT: <http://belmont.hdlgov.com/>

Lodging Establishment \_\_\_\_\_

Reporting Period (MM / YYYY) \_\_\_\_\_

Number of Rooms Rented During the Period \_\_\_\_\_

This return is subject to audit:

Average Daily Rate \$ \_\_\_\_\_

1. Gross Rent Paid for Lodging	1. \$ _____
<u>Allowable Exemptions for:</u>	
2. Excluded Rent - Term (>30 days)**	2. \$ _____
3. Total Exemptions for Federal/State Govt. Occupancies	3. \$ _____
4. Other Exemptions (Such as Foreign Govt.)	4. \$ _____
5. TOTAL EXEMPTIONS (Documentation must be attached)	5. \$ _____
6. Net Taxable Rent: Line 1 minus Line 5	6. \$ _____
7. Tax (10% or 0.10 x Line 6)	7. \$ _____
8. Penalty (Line 6 x 10% or 0.10, if 1-30 days past due, 20% for delinquencies greater than 30 days)	8. \$ _____
9. Interest (Line 5 x 1% or 0.01, for each month or fraction thereof)	9. \$ _____
10. Special tax credits (Attach copies of credit letters)	10. \$ _____
<b>TOTAL AMOUNT DUE (Add Lines 7, 8, 9 and subtract Line 10)</b>	<b>\$ _____</b>

I declare under penalties prescribed that the information provided in this return is true and correct to the best of my knowledge.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Title

*Please make check payable to: **City of Belmont***

*Mail to: **City of Belmont TOT Processing Center**  
8839 N. Cedar Ave #212 • Fresno, CA 93720*

*Need assistance? Email us at: [support@hdlgov.com](mailto:support@hdlgov.com)*

\*\*\* Term Exclusion: For stays of more than thirty (30) continuous days; -- that is, after thirty (30) consecutive days stay. The tax must be collected and remitted for days one (1) through thirty (30) in the absence of a prior written agreement renting for longer than thirty (30) continuous days.