



UTILITY USERS TAX REMITTANCE FORM

Name of Utility Service Provider: _____

Name of Billing Agent (if any): _____

Type of Utility Service(s): _____
(Gas, electricity, video (CATV and IP-TV), wired or wireless telecom (prepaid and postpaid), VoIP, conferencing services, private communication services, paging, or bundles thereof) Please provide a separate remittance form for each type of Utility Service.

Company FEIN No.: _____ Applicable tax rate: 7.5%

Tax Period Covered*: _____ Remitted by ACH: _____

The information that you provide in this remittance form will be maintained as confidential under Revenue and Taxation Code §7284.6.

Gross Charges: \$ _____

Deductions: \$ _____
[Taxes, Resale sales, Exempt Accounts]

Non-standard Adjustments**: \$ _____

Net Taxable Charges: \$ _____

Tax Percentage Applied _____ %

Penalties (15%) \$ _____

Interest: \$ _____

Total Remittance: \$ _____

Remit Payment and Form to: City of Alameda, Finance Department (Address above)

Please note that payment must be received by the City by no later than the 20th day of the following month. Penalties (15%) and interest at a rate of 0.75% per month will be imposed on delinquent payments.

*Please prepare a separate remittance form for each tax period; do not combine tax periods.

**Please describe any non-standard adjustments: _____

I declare, under penalty of perjury that to the best of my knowledge and belief of the statements herein, and any attachments hereto, is true and correct.

Signed: _____

Date: _____

Print Name/Title: _____

Phone: _____