

**CITY OF ALPINE, TEXAS
HOTEL OCCUPANCY REPORT**



Taxpayer Number

Filing Period

Due Date

Name:
Address:

Location Capacity	Outlet Trade Name & Location Address	Outlet Number	Total Room Receipts

Total Room Receipts For All Locations	_____
Exemptions:	
Employees of Federal Government on official Government business	_____
Persons staying for more than 29 days	_____
State employees (other than higher education employees) with an exempt certificate and identification	_____
Total Exemptions	_____
Total Room Receipts less Exemptions	_____
Total Tax Due (7% of Total Room Receipts less exemptions)	_____
TOTAL AMOUNT DUE AND PAYABLE	_____

Remit To:
City of Alpine
100 North 13th Street
Alpine, TX 79830
(432) 837-3301

I declare that the information in this document and any attachments is true and correct the best of my knowledge

_____ Duly Authorized Agent

SIGN HERE

Daytime Phone _____ Date _____