

Alleghany County
Finance Office
P.O. Box 366
Sparta, NC 28675
336-372-2826
336-372-6242 fax

**ALLEGHANY COUNTY
OCCUPANCY TAX REPORT**

Report for _____, payable on or before _____ 15th _____.

Sales Tax I.D. _____

Rental Name _____

Mailing Address _____

Telephone _____

Number of Units _____

If no income during reporting period, check here _____

If not in business, enter date operations ceased _____

Gross Receipts _____

Multiply Gross Receipts by 6%
(effective on rent collected on and after 12-1-11) and enter here _____

Penalty (if applicable) _____

TOTAL AMOUNT REMITTED _____

Certification by taxpayer: This is to certify that this report, including all attachments, has been examined by me and is to the best of my knowledge and belief a true and complete report in good faith covering the month indicated above and that the same is in accordance with the books and records of the reporting taxpayer.

Signature

Date

Report must be signed by owner of business, by partner if a partnership, or if a corporation, by authorized official.