



OFFICE OF THE TREASURER-TAX COLLECTOR
SHARI L. FREIDENRICH, CPA, CCMT, CPFA, ACPFIM



COUNTY OF ORANGE
P.O. BOX 4515
SANTA ANA, CA 92702-4515
PHONE: (714) 834-7625 FAX: (714) 834-2912

TOT@ttc.ocgov.com

TRANSIENT OCCUPANCY TAX RETURN

Hotel / Lodging / Operator:		Certificate Number _____
NAME: _____		
ADDRESS: _____ _____		
Phone: _____ Fax: _____ Email: _____		
<input type="checkbox"/> Mar <input type="checkbox"/> Jun <input type="checkbox"/> Sep <input type="checkbox"/> Dec		Reporting Year: _____
<ul style="list-style-type: none"><i>Tax payments must be received before 5pm on the last county business day of the month following the quarter of collection.</i><i>Late return penalty of 10% the first month plus 1.5% interest and additional continued delinquency penalties accrue each following month of delinquency.</i><i>Retain a copy for your files.</i><i>Make checks payable to County of Orange.</i>		
1.	GROSS RENTAL RECEIPTS:	\$
	EXEMPTIONS (SEC. 1-4-22) IF NONE, ENTER NONE:	
	A. RECEIPTS EXEMPTED FOR OCCUPANCIES OF 30 CONSECUTIVE DAYS OR MORE (SEC. 1-4-120):	\$
	B. RECEIPTS EXEMPTED FOR FEDERAL OR STATE OF CALIFORNIA EMPLOYEES ON OFFICIAL BUSINESS:	\$
	C. OTHER (ATTACH EXPLANATION):	\$
2.	TOTAL EXEMPTIONS: (LINES A+B+C)	\$
3.	TAXABLE RECEIPTS: (LINE 1 MINUS LINE 2)	\$
4.	TRANSIENT OCCUPANCY TAX: (10% OF LINE 3)	\$
5.	CREDITS: SEE #10 OF INSTRUCTIONS	
6.	PENALTY: IF APPLICABLE (SEE #3 OF INSTRUCTIONS)	\$
7.	INTEREST: IF APPLICABLE (SEE #4 OF INSTRUCTIONS)	
8.	TOTAL PAYMENT: (LINES 4+5-6-7)	\$
<i>I declare under penalty of perjury, that to the best of my knowledge and belief, the statements herein are correct and true.</i>		
Signed: _____ Date: _____ Phone: _____		
Print Name: _____ Title: _____ Email: _____		
Treasurer-Tax Collector Review <input type="checkbox"/>		

Mission: Ensure safe and timely receipt, deposit, collection and investment of public funds.