



The Town of Caswell Beach

North Carolina

ACCOMMODATIONS TAX REPORT

(Must be **received** in Town Hall by 15th of month following collection. This is not postmarked by date, check must be delivered to Town Hall by the 15th of the month following collection)

Owner/Agent Name & Address

Month _____

Rental Property Address: _____

Monthly Gross Rental Receipts & Tax Rate

Tax Due

\$ _____ X 3%

\$ _____ Tourist Related Expense

\$ _____ X 2%

\$ _____ Beach Repair/Protection

\$ _____ X 1%

\$ _____ Remit to County

Total Remitted: \$ _____

Make Check Payable to: Town of Caswell Beach

Under Penalties prescribed by law, I hereby affirm that to the best of my knowledge and belief, this tax report, including any accompanying statement, schedule and other information is true and complete.

Signature of Owner/Agent _____

Date _____