

City of La Verne
UTILITY USERS TAX REMITTANCE FORM

Name of Utility Service Provider: _____

Name of Billing Agent (if any): _____

Type of Utility Service(s): _____

[Gas; electricity; wired or wireless telecommunications; conferencing; text messages; private communication services. Direct sellers of prepaid wireless should remit UUT separately from postpaid wireless - Rev. and Tax. Code §42010(f)(3) effective January 1, 2016.

Company FEIN No.: _____ Gas and Electricity rate: 6%
Telecom rate: 5.75%
Prepaid wireless rate effective 1-1-2016: 5.5%
Certain exempt customers (See Sec. 3.10.030): 3%

Tax Period Covered*: _____ Remitted by ACH: _____

The information provided herein will be maintained as confidential under Rev. and Tax. Code §7284.6.

Gross Charges: \$ _____

Deductions: \$ _____
[Bad Debt, Exempt Accounts]

Non-standard Adjustments**: \$ _____

Net Taxable Charges: \$ _____

Tax Applied - All Utilities (7%) _____ %

Penalties: \$ _____

Interest: \$ _____

Total Remittance: \$ _____

Remit to: ATTN: CASHIER
 CITY OF LA VERNE
 360 "D" Street
 La Verne, CA 91750

Please note that payment must be received by the City by no later than the twentieth (20th) day of the following month (due date). Penalties (15%) and interest 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 (*Note: do not reduce your UUT remittance to adjust for over-collection of the tax from customers. Per ordinance, such adjustments require prior City approval*):

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

Date: _____ Signed: _____

Phone: _____ Print Name/Title : _____