

**RETURN DUE ON OR BEFORE  
THE 20<sup>TH</sup> OF EACH MONTH**

# CITY OF ORANGE BEACH

P.O. Box 1159 ♦ Orange Beach, AL 36561

251-981-6096 ♦ Fax 251-981-2551

www.cityoforangebeach.com

## TAX RETURN

Batch \_\_\_\_\_

Check \_\_\_\_\_

Amount \_\_\_\_\_

Account No. \_\_\_\_\_

Reporting Period \_\_\_\_\_

(This return only for the business shown below)

Check here for address change

Check here if this is a FINAL tax return

Total Amount Remitted

\$ \_\_\_\_\_

Make check payable to: CITY OF ORANGE BEACH

Type of Tax	Tax Rate %	(A) Gross Receipts	(B) Total Deduction (see back)	(C) Net Taxable	(D) Tax Due	(E) Plus (+) Penalty/ Interest	(F) Less (-) Discount	(G) Amount Due
Sale -General	3.0							
Sale -General P.J.	1.5							
Sale -Automotive	.50							
Sale -Automotive P.J.	.25							
Sale -Machine/Agriculture	1.0							
Sale -Mach/Agriculture P.J.	.50							
Lodging	5.0							
Lodging P.J.	2.5							
Use -General	3.0						N/A	
Use -General P.J.	1.5						N/A	
Use -Automotive	.50						N/A	
Use -Automotive P.J.	.25						N/A	
Use -Machine/Agriculture	1.0						N/A	
Use -Mach/Agriculture P.J.	.50						N/A	
Lease -General	3.0						N/A	
Lease -General P.J.	1.5						N/A	
Lease -Auto/Linens/etc	1.0						N/A	
Lease -Auto/Linens/etc P.J.	.05						N/A	
Auto Vehicles Withdrawn No. _____ x \$5.00							N/A	

(\* P.J. – Police Jurisdiction)

This return must be postmarked by the 20<sup>th</sup> day of the month following the reporting period for which you are filing to be considered a timely return.

Total Amount Due \_\_\_\_\_

Overpayment Credit \_\_\_\_\_

Net amount due \_\_\_\_\_

By signing this report I am certifying that this report, including any accompanying schedules or statements, has been examined by me and is to the best of my knowledge and belief, a true and complete report for the period stated.

Signature & Title \_\_\_\_\_ Date \_\_\_\_\_

## INSTRUCTIONS FOR FILING CITY OF ORANGE BEACH TAX RETURN

- Column A Enter gross receipts (both cash/credit, nontaxable/ taxable).
- Column B Enter total deductions from standard deductions summary table below.
- Column C Enter net taxable - Column A (Gross Receipts) less Column B (Total Deduction)
- Column D Enter tax due for each tax type by multiplying tax rate by Column C (Net Taxable).
- Column E Enter penalty (20% of Tax Due) and interest (1% per month Tax Due) if delinquent.
- Column F Enter discount (5% of first \$100 tax or less, and 2% of any tax over \$100) for return timely filed. Sales tax maximum discount is \$400. Use and Lease tax, no discount.
- Column G Enter amount due for tax type: Column D (Tax Due) plus Column E (Principle and Interest) or minus Column F (Less Discount) if appropriate
- Total Amount Due Add all amounts in Column G (Amount Due) and place results on the "Total Amount Due" line.
- Overpayment Credit Please enter any credits for which you have a letter of credit issued by the City of Orange Beach.
- Net Amount Due Total Amount Due, less any credits for which you have a credit letter.
- Total Amount Remitted Enter amount from "Net Amount Due" in the "Total Amount Remitted" Box on top of the return.

### Standard Deduction Summary Table

*(Summary below must be completed to correspond with total deductions on front of Tax Report)*

TYPE OF TAX	WHOLE SALE TAX	AUTO TRADE-INS	LABOR/ NON-TAXABLE SERVICE	SALES DELIVERY OUTSIDE JURISDICTION	SALES TO GOVERNMENT OR ITS AGENCIES	SALES OF GAS OR LUBE OILS	OTHER ALLOWABLE DEDUCTIONS	TOTAL DEDUCTIONS
Total Deductions								

- ❖ To avoid the application of penalty and/or interest amounts, this report must be filed on or before the 20<sup>th</sup> of the month following the period for which the report is submitted. Cancellation postmark will determine timely filing.
- ❖ A remittance for the total amount due made payable to the tax jurisdiction must be submitted with this report.
- ❖ This report should be submitted on a monthly basis unless you have requested and been approved for a different filing frequency.
- ❖ Any credit for prior overpayment must be approved in advance by the taxing jurisdiction.
- ❖ No duplicate or replicated forms acceptable except with prior approval of the taxing jurisdiction.

**Indicate Any Account Changes Below**

Business Name \_\_\_\_\_ Phone \_\_\_\_\_

Contact Person \_\_\_\_\_ Fax \_\_\_\_\_

Physical Address \_\_\_\_\_

Mailing Address \_\_\_\_\_