

TOWN OF BATH

271 Wilkes Street
Berkeley Springs, WV 25411
304-258-1102 Townadmin@townofbathwv.gov

HOTEL OCCUPANCY TAX REMITTANCE

Name _____

Address _____

Phone _____

Month of Remittance: _____ 202_____

(Due by the 15th of the following month)

Total Room Sales for Month \$ _____

(Less) Room Sales Exempted \$ _____

Subtotal \$ _____

X _____ 6%

TOTAL TAX DUE \$ _____

Please make checks payable to: **Town of Bath**