



CITY OF GARDENA Revenue and Collections Office
1700 WEST 162ND STREET, ROOM 104
GARDENA, CA 90247
(310) 217-9518 / FAX (310) 217-6119

CITY OF GARDENA UTILITY USERS TAX REMITTANCE FORM

Company Name: _____

Company Address: _____

Company Phone No.: _____ **Company FEIN No.:** _____

Tax Period Covered : _____ **Type of Utility Service*:** _____

**Please submit separate remittance forms for each category of utility service that you provide, such as wired or wireless telecommunications, electric, gas and water services. If more than one category of utility services is bundled together and billed as a single amount, please specify which utility services are bundled. The information that you provide in this remittance form will be maintained as confidential under California Revenue and Taxation Code Section 7284.6.*

Remittance Based Upon Utility Billing

- | | |
|--|----------|
| 1. Gross charges (including taxes and surcharges) | \$ _____ |
| 2. Deductions | |
| a. Taxes (federal, state, 911 tax) | \$ _____ |
| b. Sales for Resale | \$ _____ |
| c. Exempt Accounts | \$ _____ |
| d. Other non-taxed charges** | \$ _____ |
| 3. Adjustments** (plus or minus) | \$ _____ |
| 4. Net taxable charges (line 1 minus lines 2+3) | \$ _____ |
| 5. Local Tax Due (@ 5% of line 4) | \$ _____ |
| Except 3.5% for prepaid wireless effective 1-1-2016 | |
| 6. Penalties/Interest*** | \$ _____ |
| 7. Total local tax due (sum lines 5 and 6) | \$ _____ |

****Please attach a description of any adjustments or services not subject to the local tax referred to on lines 2d and 3.**

*****A 15% penalty may apply if payment is not remitted to the City within the first twenty days of the month that follows the month in which you receive the utility users tax from the customer.**

MAKE CHECK PAYABLE TO: CITY OF GARDENA

**MAIL TO: CITY OF GARDENA
ATTN: REVENUE AND COLLECTIONS OFFICE
1700 W. 162ND STREET
GARDENA, CA 90247**

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:** _____