# Visitor Accommodation Facility (VAF) Return

**City of Monterey**

**Visitor Accommodation Facility (VAF) Return**

**Reporting Period:**

**Hotel Name:**

**Hotel Address:**

### Transient Occupancy Tax (TOT):

1. Total transient rent charged and received
2. LESS: Rentals of 31 or more consecutive days *(Attach forms)*
3. LESS: Exemptions for government officials *(Attach forms)*
4. LESS: *Food/Beverage sales included in transient rents* *(If reporting food/bev - Exempt rent subject to sales tax)*
5. Net amount taxable *(Item 1 less Items 2, 3, & 4)*
6. TOT Rate 12%
7. TOT due to City of Monterey *(Item 5 multiplied by Item 6)*
8. Late Penalties 10% *(if paid after 15th)*
9. Total TOT and penalties *(Item 7 + 8)*
10. Total TOT Due

### Conference Center Facilities District (CCFD) Special Tax:

11. Net taxable transient rent *(Item 5 + add back in Item 3)*
12. CCFD Tax rate
13. CCFD tax due *(Item 11 multiplied by Item 12)*
14. Late Penalties 10% *(if paid after 15th)*
15. Total CCFD Tax + Penalties *(Item 13 + 14)*

### Tourism Improvement District (TID) Assessment:

16. Total occupied room nights
17. TID Rate per occupied night
18. TID Assessment due *(Item 16 multiplied by Item 17)*
19. Late Penalties 10% *(if paid after 15th)*
20. Total TID Assessment + Penalties *(Items 18 + 19)*

21. Total TOT + CCFD + TID Due *(Items 10 + 15 + 20)*

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By signing below I declare under penalty of perjury under the laws of the State of California, that the foregoing is true and correct and that this form may be delivered by mail, e-mail, or other electronic means with a wet signature, pdf signature, or any electronic signature complying with the U.S. federal ESIGN Act of 2000, California’s Uniform Electronic Transactions Act (Cal. Civ. Code 1633.1, et seq.) or other applicable law, and any copy so delivered shall be deemed to be valid and effective for all purposes. The taxes collected must be remitted in full by the due date each month.

Sending only the reporting form, without full payment, will not be considered a timely submittal.

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Signature __________________________ Date __________________________

Print Name/Title __________________________

Return form and payment to:

City of Monterey Revenue Division  
735 Pacific Street, Suite A  
Monterey, CA 93940

Questions?  
online at www.monterey.org  
Phone: (831) 646-3944  
Email: revenue@monterey.org

*Find your hotel’s CCFD and TID Rates at www.monterey.org on our VAF Page see the document named "Address and Rates Listing"