

City of Grand Island Finance Department
1306 West 3rd Street, PO Box 1968
Grand Island, NE 68802-1968
308-385-5444 Ext. 161

Rental Car Occupation Tax

Name: _____
DBA: _____
Address: _____
City, State, Zip: _____
Contact Name: _____
Contact Number: _____
E-mail: _____

Reporting Period (for month ending): _____

- | | |
|---|-------------|
| 1) *Gross Sales | _____ |
| 2) Occupation Tax Rate (multiply line 1 by .06) | _____ x .06 |
| 3) Occupation Tax Due | _____ |

NOTE: Taxes are due or postmarked by the 25th of the month following the reporting month and delinquent the next day.

Only complete next section if paying late:

Late Payment Fees:

- | | |
|--|-------|
| 4) Prior Period Penalties | _____ |
| 5) Delinquency Penalties (10% of Occupation Tax due) | _____ |
| 6) Interest Penalties (1% per month) | _____ |
| 7) Late Payment Fee Total (Total of line 4+5+6) | _____ |
| 8) Total Amount Due (Total of lines 3+7) | _____ |

Signature: _____

Printed Name _____

Date: _____

You may wish to seek advice from your tax consultant on the calculation of the occupation tax in coordination with any other sales tax or other occupation taxes for which your business is responsible for. This occupation tax is a tax on the business that you are engaged in.

*Gross sales subject to the tax shall include receipts for the rental rates charged for each vehicle rental contract but excluding receipts from exempt sales listed in City Ordinance No. 9642.

Please return the completed form with payment to the address shown above.