

**CITY OF CANNON BEACH**  
**PO Box 368, Cannon Beach OR 97110**  
**503-436-8056**  
**TRANSIENT ROOM TAX COLLECTION RETURN**

Hotel/Motel Name: \_\_\_\_\_

Business Address: \_\_\_\_\_  
\_\_\_\_\_

Location: \_\_\_\_\_

Address if more than one location:  
\_\_\_\_\_  
\_\_\_\_\_

Manager's Name: \_\_\_\_\_

# of Rental Units: \_\_\_\_\_

Owner's Name: \_\_\_\_\_

Owner Address: \_\_\_\_\_  
\_\_\_\_\_

Quarter ending: \_\_\_\_\_

Account Number: \_\_\_\_\_

Date Due: \_\_\_\_\_

**Calculation of Tax Due:**

1. Gross Room Rent: \_\_\_\_\_

2. Exemptions: \_\_\_\_\_

3. Taxable Rent: \_\_\_\_\_ (line 1 minus line 2)

4. Transient Room Tax: \_\_\_\_\_ (8% of line 3)

5. Collection Fee: \_\_\_\_\_ (5% of line 4)

6. Tax Due: \_\_\_\_\_ (line 4 minus line 5)

**Delinquencies:**

Tax payments are considered delinquent if paid after the last day of the month in which they are due. Penalties assessed to delinquent accounts are specified in Section 3.12090 of the Cannon Beach Municipal Code.

**Please List any exemptions for this quarter.**

**If there is no activity, a quarterly tax form is still required to be filed showing \$0 income.**