



**Council**

Samuel E. Murray  
Mayor

Mary Beth Heyward  
Mayor Pro Tempore

Jerry Ashmore  
Robert Landrum  
Darryl Owens

Van Willis  
Town Manager

T. Alan Beach  
Chief of Police

Jeffrey S. Coppinger  
Operations

Linda Bridges  
Planning

**LOCAL ACCOMMODATIONS FEE**

Business Name/Address \_\_\_\_\_ Account Number: \_\_\_\_\_  
 \_\_\_\_\_ Month: \_\_\_\_\_ Year \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Computation of Fee**

- 1. Gross Proceeds of sales covered by Hospitality Fee \$ \_\_\_\_\_
- 2. Fee due (Line 1 x 3%) \$ \_\_\_\_\_
- 3. Penalty (10% if not received by the 20<sup>th</sup> of the month following report month) \$ \_\_\_\_\_
- 4. Additional penalties (10% on the 21<sup>st</sup> of each month thereafter until paid) \$ \_\_\_\_\_
- 5. **Total Accommodations Fee & Penalty Due** \$ \_\_\_\_\_

**NOTE:** Payment is due on or before the 20<sup>th</sup> of the month following the “Sales” month shown above. A 10% penalty shall be added on the 21<sup>st</sup> day of each month following that date until paid.

I hereby certify, under penalty of Law, that the “gross proceeds of sales covered by Accommodations Fee” shown above accurately reflects the total proceeds to which the fee is applicable for the period covered by this report.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name Telephone \_\_\_\_\_ Date \_\_\_\_\_  
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 csmalls@portroyal.org