

Instructions for Completing the Town of Flower Mound Hotel Occupancy Tax Report

General Information

Who Must File:

- You must file this report if you are a sole owner, partnership, corporation or other organization that owns, operates, manages or controls any hotel, motel, or bed and breakfast within the Town or ETJ of the Town of Flower Mound.
- Complete and detailed records must be kept of all receipts reported and exemptions or reimbursements claimed so that reports can be verified.
- Failure to file this report and pay applicable tax may result in penalties as prescribed by Chapter 62, Article IV, Sections 100-108 of the Town of Flower Mound's Code of Ordinances.

When to File:

- The report and appropriate tax payment are due on the 15th day of the month following each month in which the tax is earned.
- Reports must be filed for every month even if you have no amount subject to tax or no tax due.
- If the due date falls on a Saturday, Sunday or Town holiday, the next business day will be the due date.

For Assistance:

- Call 972-874-6000 with any questions. To obtain a Hotel Occupancy Tax Report go to www.flower-mound.com.

Specific Instructions

- Item 1** Enter the trade name contact person.
- Item 2** Enter the filing period of the report (the month).
- Item 3** Enter the mailing and physical location addresses (including city, state and ZIP code).
- Item 4** Enter phone numbers, email addresses and additional contact persons, etc. so that you may be contacted if needed.
- Item 5** Enter the total amount of room receipts for the physical location shown. Enter "0" if no receipts were collected.
- REMEMBER: Subtract the total amount of exceptions* from the TOTAL RECEIPTS (Item 5) and enter the result in TAXABLE RECEIPTS (Item 6). If you have no taxable receipts to report enter "0". DO NOT ENTER EXEMPTIONS/DEDUCTIONS ON THIS REPORT. Exemptions must be detailed on the Hotel Occupancy Tax Exemptions Form and attached to this report.*
- Item 6** Enter the amount of TAXABLE receipts for the physical location shown. Enter "0" if no taxable receipts were collected.
- *Note: The following are exceptions to the tax:*
- Use or possession of a room for at least 30 consecutive days as a permanent residence with no interruption of payment for the period; or
 - Use by a U.S. Federal Government Employee traveling on official business; or
 - Use by Diplomatic Personnel with a Tax Exemption Card; or
 - Use by a State of Texas official presenting a hotel tax exemption card. (See Rule 3.161.) State government agencies and their employees (except those state employees with hotel tax photo ID cards) may NOT claim an exemption for hotel tax.
- Item 7** For total tax due enter 7% of item 6.
- Item 8** Discount - If the report is filed and the tax paid on or before the due date, enter a discount of one percent (.01) of Item 7.
- Item 9** Subtract Item 8 from Item 7 and enter the difference here.
- Item 10** Penalty - If the tax is not paid by the 25th day of the month following the month in which the tax is earned, add 15% penalty.
- Item 11** Add Items 9 and 10, and enter sum here.



Town of Flower Mound Hotel Occupancy Tax Report

1. Business Name C/o	2. Report Filing Period (Month)
3. Mailing Address Physical Address	
4. Additional Information (Phone Numbers, Email Addresses, Additional Contacts, Etc...)	

5. Total Receipts	\$	
6. Total Taxable Receipts	\$	
7. Total Tax Due (7% of Item 6)	\$	
8. Discount (If paid on time, enter 1% of Item 7)	\$	
9. Tax Due after Discount (Item 7 minus Item 8)	\$	
10. Penalty (see instructions)	\$	
11. TOTAL AMOUNT DUE AND PAYABLE (Item 9 plus Item 10) <i>A report must be filed even if no tax is due.</i>	\$	

<i>Make the amount in Item 11 payable to Town of Flower Mound</i>	<i>Contact Us</i>
Mail to: Town of Flower Mound Financial Services Department 2121 Cross Timbers Rd. Flower Mound, TX 75028	For Assistance call (972) 874-6000 Forms and Instructions available online at: www.flower-mound.com

<i>I declare that the information in this document and any attachments is true and correct to the best of my knowledge and belief. In addition, the tax remitted and paid to the Town with this report was collected pursuant to the requirements of Chapter 62, Section 62-103, Flower Mound Municipal Code, as amended.</i>	
Duly Authorized Agent	
Sign Here >	
Print Here >	Date