

**CITY OF SANTA CRUZ  
TOURISM MARKETING DISTRICT ASSESSMENT RETURN**

Business or Property Name: \_\_\_\_\_

Reporting Period:

Month: \_\_\_\_\_

Other - specify: \_\_\_\_\_

1. TOTAL OCCUPIED ROOM NIGHTS (each room/unit x occupied nights)	1	
2. LESS ROOM NIGHT EXCEPTIONS	2	
3. TOTAL ROOM NIGHTS ASSESSED (Line 1- Line 2)	3	
4. TIER RATE: TIER 1 (\$2.15), 2 (\$2.80), 3 (\$3.15) or 4 (\$4.05)	4	
5. Total Tourism Assessment Due (Your Tier Rate x Line 3)	5	
6. LATE PENALTY (10% x Line 5 for first 30 days late + Additional 15% x line 7 for over 30 days late)	6	
7. INTEREST (1.5% x Line 5 x number of months late)	7	
8. TOTAL ASSESSMENTS, PENALTY AND INTEREST DUE (Sum of Line 5, 6, and 7 )	8	
9. CREDIT CARD FEE (3% of Line 8)- Only to be added when paying with Credit Card	9	
10. TOTAL DUE (Sum of Lines 8 & 9)	10	

I declare under penalty of perjury that the information contained herein is true and correct.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title

\_\_\_\_\_  
Phone Number

\*The TMD assessment is due at the same time as your Transient Occupancy Tax and should be submitted together.

\*\* Returns are subject to review by the Finance Department. If anything additional is owed, you will be contacted by email or letter.

**Pay Online!**

[www.cityofsantacruz.com](http://www.cityofsantacruz.com)

**Mailing Address**

1200 Pacific Ave  
Suite 290  
Santa Cruz, CA 95060

**Walk-In Payments**

809 Center Street Room 101  
Open Mon-Thurs  
7:30AM-11:30 AM