

**CITY OF PACIFICA**  
**UTILITY USERS TAX REMITTANCE FORM**

Company: \_\_\_\_\_  
Company Address: \_\_\_\_\_  
\_\_\_\_\_  
Company Phone Number: \_\_\_\_\_ Company FEIN No.: \_\_\_\_\_  
Tax Period Covered: \_\_\_\_\_ Type of Utility Service: \_\_\_\_\_  
Account Number: \_\_\_\_\_

*\*Please submit separate remittance forms for each category of utility service that you provide, such as wired or wireless telecommunications, electric, and gas services. If more than one category of utility services is bundled together and billed as a single amount, please specify which utility services are bundled. The information that you provide in this remittance form will be maintained as confidential under California Revenue and Taxation Code Section 7284.6.*

**Remittance Based Upon Utility Billing**

- |           |  |          |
|-----------|--|----------|
| <b>1.</b> | <b>Gross charges (including taxes and surcharges)</b>            | \$ _____ |
| <b>2.</b> | <b>Deductions</b>  |          |
|           | <b>a. Taxes (federal, state, 911 tax)</b>                        | \$ _____ |
|           | <b>b. Sales for resale</b>                                       | \$ _____ |
|           | <b>c. Exempt accounts</b>  | \$ _____ |
|           | <b>d. Other non-taxed charges**</b>                              | \$ _____ |
| <b>3.</b> | <b>Adjustments** (plus or minus)</b>                             | \$ _____ |
| <b>4.</b> | <b>Net taxable charges (line 1 minus lines 2a thru 2d and 3)</b> | \$ _____ |
| <b>5.</b> | <b>Local tax due (6.5% of line 4)</b>                            | \$ _____ |
| <b>6.</b> | <b>Penalties/Interest***</b>                                     | \$ _____ |
| <b>7.</b> | <b>Total local tax due (sum of lines 5 and 6)</b>                | \$ _____ |

*\*\*Please attach a description of any adjustments or services not subject to the local tax referred to on line 2d and 3.*

*\*\*\*A 10% penalty and 1.5% monthly interest may apply if payment is not received by the City within the month that follows the month in which you receive the utility users tax from the customer.*

MAKE CHECK PAYABLE TO: **CITY OF PACIFICA**

MAIL TO: **CITY OF PACIFICA**

**170 SANTA MARIA AVENUE  
PACIFICA, CA 94044**

I declare, under penalty of perjury, that to the best of my knowledge and belief the statements herein, and any attachments hereto, are true and correct.

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

Signed: \_\_\_\_\_

Phone: \_\_\_\_\_

Print Name/Title: \_\_\_\_\_