



**Company:** \_\_\_\_\_ **Reporting Period:** \_\_\_\_\_  
**Address:** \_\_\_\_\_  
**City, State, Zip:** \_\_\_\_\_

**PART A: Santa Clara Tourism Improvement District Assessment**

*Penalties and interest for delinquent payments will be billed separately. For additional information, please refer to the Santa Clara Tourism Improvement District Management Plan (SCTID MDP) at [SCTID MDP](#).*

1. Gross short-term rental revenues	\$ _____
2. Less: Exemptions (attach TID Exemption Forms and applicable documents)	\$ ( _____ )
3. Rental revenues subject to TID assessment (Line 1 minus Line 2).	\$ _____
4. TID Assessment Due to City for the Period: 2.0% of Line 3.	\$ <span style="border: 1px solid black; display: inline-block; width: 150px; height: 20px; vertical-align: middle;"></span>

I declare under penalty of making a false statement that this information is true and correct to the best of my knowledge.

Signature	Title	Date
Please Print Name	Email	Phone No.

**INSTRUCTIONS**

1. Complete PART A above.
2. Sign and email a copy of the completed form to: [acctsreceivable@santaclaraca.gov](mailto:acctsreceivable@santaclaraca.gov), AND
3. Return signed form with applicable documents (as necessary) and payment to:
 

City of Santa Clara  
Accounting Services  
1500 Warburton Avenue  
Santa Clara, CA 95050  
Phone No. (408) 615-2371
4. Make check payable to: **City of Santa Clara**.
5. SCTID Assessments are payable on or before the last day of the month following the close of each calendar quarter. Assessed lodging business which are delinquent in paying the assessment are subject to penalties and interest as outlined on page 12 of the SCTID Management District Plan and will be billed for separately by the City.
6. Returns and payments are due immediately upon cessation of business for any reason.