



PAYMENT FORM FOR MEALS TAX

Name of Firm: _____

Payment Month: _____

Part A:

- 1. Total receipts for food and/or beverages
(see Code of the Town of Big Stone Gap - Meals Tax Ordinance) _____
- 2. Meals Tax (7% of Big Stone Gap Food and Beverage Sales) X _____ 7%
- 3. **Total Meals Tax Collected** _____

Part B:

- 4. Total Meals Tax Collected (Part A, Line 3): _____
- 5. Business Commission X _____ 5%
(5% discount for payment **received/postmarked** by the 20th of the month)
- 6. **Total Business Commission for Timely Payment** _____

Part C:

- 7. Total Meals Tax Collected (Part A, Line 3): _____
- 8. Less: Total Business Commission (Part B, Line 6): - _____
- 9. **Total Meals Tax Payable to the Town of Big Stone Gap** (Line 7 minus Line 8) _____

Part D:

Payments are due on or before the 20th day of the month following the month in which the taxable sales were made. If paid after this date, the account is considered delinquent - proceed to Line 10:

- 10. Total Meals Tax Collected (Part A, Line 3) _____
- 11. Late Payment Penalty - 10% of Total Meals Tax Payable (Line 10 x .10) + _____
- 12. Interest at 10% per annum if more than 30 days delinquent + _____
(Line 10 x .10 ÷ 12 x no. of mths past due)
- 13. **Total Tax, Penalty, and Interest Due** (Add Lines 10, 11, and 12) _____

Make checks payable to: Treasurer, Town of Big Stone Gap
505 East 5th Street S
Big Stone Gap, VA 24219

I do hereby certify that the information reported above is true and correct.

Signature of Preparer / Authorized Representative

Date