



**TOWN OF HILTON HEAD ISLAND  
REVENUE SERVICES DIVISION**  
One Town Center Court, Hilton Head Island, SC 29928  
Phone (843) 341-4677 Fax (843) 341-4637  
You can pay online at: [www.hiltonheadislandsc.gov](http://www.hiltonheadislandsc.gov)

Hospitality Tax Payment Form

NAME \_\_\_\_\_  
MAILING ADDRESS \_\_\_\_\_

ACCOUNT #: \_\_\_\_\_  
PHYSICAL ADDRESS \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

Important: A tax payment form must be filled out and submitted each quarter. Additional forms can be obtained through [www.hiltonheadislandsc.gov](http://www.hiltonheadislandsc.gov).

FILING STATUS: Circle one ... Monthly / Qtrly      PAYMENT FOR PERIOD MONTH \_\_\_\_\_ QUARTER: 1st, 2nd, 3rd, 4th YR: \_\_\_\_\_

IS THE BUSINESS SOLD? If yes, please complete the following information:      Date Sold: \_\_\_\_\_

NEW OWNER NAME \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

**HOSPITALITY TAX**

T FOR OFFICE USE ONLY T

Report in Whole Dollars

- |   |                        |     |   |        |
|---|------------------------|-----|---|--------|
| 1. Gross Proceeds: Food and Beverages   |                        | [ ] | - | [ XX ] |
| 2. Hospitality Tax  | Line 1 x 2%* (.02) ... | [ ] | - | [ ]    |
| 3. Penalties are calculated as follows: 5% of the unpaid amount...for each month or portion thereof after the due date until paid. Additionally, delinquent businesses may be subject to a \$1092.50 municipal summons. | ...                    | [ ] | - | [ ]    |
| 4. Total Hospitality Tax Due (Add Lines 2 and 3)  |                        | [ ] | - | [ ]    |

Postmark	_____
CK#	_____
Receipt#	_____
Hospitality Tax	_____
Penalty	_____
Amt Received	_____
Adjustment	_____
Bal Due	_____
Refund Due	_____
Source:	B or C



**IMPORTANT ...** Enclose payment with report. Please do not staple  
This return becomes **DELINQUENT** if it is postmarked after the 20th day following the end of the period. \*Make additional copies for each quarter as needed.

I hereby certify that the information contained on this report is true and accurate to the best of my knowledge and belief

Name: \_\_\_\_\_

Signature: \_\_\_\_\_