



# City of Inglewood

## Short Term Rental (STR) - Transient Occupancy Tax Assessment

Short Term Rental Location: \_\_\_\_\_

Property Owner: \_\_\_\_\_ APN: \_\_\_\_\_

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

TOT RETURN FOR THE MONTH: \_\_\_\_\_

Day of Month	Gross Rental Receipts
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	
11	
12	
13	
14	
15	
16	
17	
18	
19	
20	
21	
22	
23	
24	
25	
26	
27	
28	
29	
30	
31	

**Name of Host Platform**

**Office Use Only**

Acct Code: 001.001.0101.1028.01

**Instructions:**

Under Gross Rental Receipts, provide the amount of money earned for the booking on each day of the month. Add Days 1-31 and place that amount in the box labeled "TOTAL TAXABLE RECEIPTS", multiply the figure in Total Taxable Receipts by .155 (15.5%). Place that calculation in the Total Remittance Box. You must also provide a Monthly Earnings Statement, including months with no booking activity. Please ensure that you use a separate TOT Form for each Hosting Platform.

Please remit TOT & Earnings Statement to the City of Inglewood Finance Department, located at  
 One W. Manchester Blvd, 1st Floor, Inglewood, CA 90301  
 For questions please contact - Housing Protection STR Program  
 Email: [housingprotectionstr@cityofinglewood.org](mailto:housingprotectionstr@cityofinglewood.org)  
 Contact: 310-412-4299

TOTAL TAXABLE RECEIPTS:

TOT .155 (which is 15.5%)

**Total TOT Remittance:**

I certify under the penalty of perjury that the information provided is true and correct.

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

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

**NO CHECKS ACCEPTED**