



**County of Fairfax**  
**Department of Tax Administration**  
 12000 Government Center Parkway, Suite 261  
 Fairfax, Virginia 22035  
 Phone: 703-222-8234 Fax: 703-324-3500  
 Web Site: www.fairfaxcounty.gov/dta  
**Quarterly Tax Return for a Short Term Rental Business**  
 Code of Virginia 58.1-3510 (B) & (C)

**2008**

To be completed by business owner (for each location)

For Office Use Only

Federal Tax Identification Number \_\_\_\_\_  
 Virginia Sales Tax Number \_\_\_\_\_  
 Business Telephone Number \_\_\_\_\_  
 Date Business Began In Fairfax County \_\_\_\_\_  
 Description of Property Rented \_\_\_\_\_

Owner Name \_\_\_\_\_  
 Trade Name \_\_\_\_\_  
 Headquarters Location \_\_\_\_\_  
 Fairfax County Business Location \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 Business Tax Contact \_\_\_\_\_  
 (Name and Phone Number) \_\_\_\_\_

**THE FOLLOWING INFORMATION MUST BE COMPLETED** (refer to enclosed completion instructions)

The receipts reported are for the quarter ending: \_\_\_\_\_ March 31 \_\_\_\_\_ June 30 \_\_\_\_\_ September 30 \_\_\_\_\_ December 31

1	Total Gross Receipts		1	_____
2	Total Gross <b>Rental</b> Receipts		2	_____
3	Total Rental Receipts Involving <u>Personal Services</u> and Rental Property <b>NOT</b> Owned		3	_____
4	Adjusted Gross Rental Base (subtract line 3 from line 2)		4	_____
5	Total Receipts from Short Term Rental (rentals of 92 consecutive days or less)		5	_____
6	Exempted and/or Excluded Rentals		6	_____
7	Adjusted Daily Short Term Rental Receipts (subtract line 6 from line 5)		7	_____
8	Total Daily Rental Tax Collected	000018 0385	8	_____
9	Penalty for Late Payment (10% of Tax Past Due or \$10.00; whichever is greater)	000018 0386	9	_____
10	Interest (5% per year on the sum of lines 8 and 9)	000018 0387	10	_____
11	Total Daily Rental Tax Paid (add lines 8, 9 and 10) (Enclose a check for the exact amount)		11	_____

**This return must be filed and taxes paid no later than the 20th of the month following the end of the quarter.**

I, the undersigned, hereby certify under penalty of perjury that the information provided herein is true and accurate to the best of my knowledge and belief.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date