

City of Piedmont
RENTAL TAX FORM - INCOME FROM CALENDAR YEAR 2021

1. Owner's Name(s) _____

2. Owner's Mailing Address Street _____
 City _____ Zip _____

3. Phone _____ Email Address _____

4. Ownership Type (Check one) Sole Proprietorship _____ Partnership _____ Corp _____ Trust _____

5. The State of California requires that you provide one of the following:
 SSN (Social Security #) _____ FEIN (Federal Employer's I.D. #) _____

6. Rental Property Information - List each rental property separately.

		Gross Receipts	Please check <u>one</u>			
		01/01/21 to 12/31/21	House	ADU	Bedroom	STR
Street _____	Zip _____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Street _____	Zip _____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Street _____	Zip _____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Street _____	Zip _____	\$ _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Total Gross Receipts		\$ _____				

7. Gross receipts per (6) above \$ _____ X .01395 = _____ **Tax Due**

Example: \$18,500 x .01395 = \$258.08 Tax Due

PLEASE NOTE: **If tax owed is between \$1.00 and \$199.00, the minimum tax due is \$200.**

Provide Proof of Gross Receipts – Attach ONE of following: A copy of the current lease agreement, a copy of Schedule E (income from rental property for current Federal Tax Form 1040), copies of checks received, statement from your accountant of gross receipts, or a month-to-month recording of rental income collected.

Effective January 1, 2018, state law (GC § 4467) requires that all applicants for local business licenses add a **\$4.00 fee** to support state and local disability access programs in addition to the business license tax imposed by the City.

8. **Please check one and fill in amount to the right:**

My rental tax per line 7 is: \$ _____ **OR**

I am subject to the **minimum annual tax of \$200:** \$ _____ **OR**

I did **NOT** rent any portion of my property during 2021.

Mandatory State Disability Access fee: \$ _____ **4.00**

Total Enclosed is: \$ _____ **Cash or Check Only**

9. I hereby certify under penalty of perjury that the information provided in this application is true and correct.

Signature _____ Date _____

Tax payments are due February 15, 2022. Overdue if postmarked after March 1, 2022.

Late penalties assessed on payments made after 03/01/22 - See reverse side for penalty rates.

Upon receipt of payment, a Municipal Business Tax receipt will be issued and sent to the owner's mailing address.

LATE PENALTY RATES

The Piedmont City Code (Sec. 10.9) assesses a penalty on overdue payments based on a percentage of the tax amount owed. The penalty assessed is related to the date the tax papers are postmarked/received. Penalties will accrue until tax and penalty are paid.

PENALTY

Filed after March 1	25% of tax owed
Filed after April 1	50% of tax owed
Filed after May 1	100% of tax owed

Penalty owed: \$ _____

STATE OF CALIFORNIA DISABILITY ACCESS FEE

Under federal and state law, compliance with disability access laws is a serious and significant responsibility that applies to all California building owners and tenants with buildings open to the public. You may obtain information about your legal obligations and how to comply with disability access laws at the following agencies:

The Division of the State Architect at www.dgs.ca.gov/dsa/Home.aspx.

The Department of Rehabilitation at www.rehab.cahwnet.gov.

The California Commission on Disability Access at www.cdda.ca.gov.

You may call the City Clerk's Office at **(510) 420-3040** or email cityclerk@piedmont.ca.gov for questions regarding this form.

Business Hours: 8:30 am to Noon and
1:00 pm to 5:00 pm
Monday through Friday

Mail or drop payments off at:

City Clerk's Office
City of Piedmont
120 Vista Avenue
Piedmont, CA 94611