

**CITY OF ONTARIO
BUSINESS LICENSE DIVISION
303 East B Street
Ontario, CA 91764**

PARKING TAX REPORT FORM

OPERATOR _____
ADDRESS _____
CITY, STATE, ZIP _____
PHONE _____
BUSINESS LIC# _____
MONTH ENDING _____

		A	B	C	D
DAY	NUMBER OF VEHICLES	OVER \$1.75 PARKING \$1.75 PER VEHICLE	DAILY FEES \$1.75 OR UNDER \$1.75	MONTHLY CHARGE OF 12.5%	Total
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					\$ -
Monthly					\$ -
Total	-	\$ -	\$ -	\$ -	\$ -

Penalty (10%) _____

Interest (1% per month or fraction thereof) _____

Total Due \$ _____

PAYMENT MUST BE POSTMARKED OR RECEIVED NO LATER THAN 20 DAYS AFTER REPORTED MONTH-END. CITY OF ONTARIO MUNICIPAL CODE SECTION 3-8.05 AUTHORIZES EXAMINATION OF OPERATOR RECORDS TO VERIFY ACCURACY OF THIS REPORTING FORM.

Under penalty of perjury, I declare that I have examined this form and to the best of my knowledge and belief it is true and complete

Signature Name Title Date

Please make check or money order payable to the City of Ontario and mail to:
City of Ontario, Business License Division 303 East. "B" Street, Ontario, CA 91763
Phone: (909) 395-2021 Fax: (909) 395-2089