

Hotel Occupancy Tax request for Quarterly Payments
Real County Tax Office
PO BOX 898
Leakey, TX 78873
830-232-6210

Outlet name:	Mailing Address:	
City:	State:	Zip Code:
Phone Number:	Email Address:	

I, _____, am requesting to start paying the Hotel Occupancy tax quarterly for _____, effective _____.

A Hotel Occupancy Tax return form will need to be completed for each month and sent in with a check for the 4% due at the end of the quarter. If the request for quarterly payments is submitted in the middle of the quarter, monthly payments will need to be made until the start of the following quarter.

The payment schedule for quarterly payments will be as follows:

Quarter 1: Due April 20th <ul style="list-style-type: none"> • January • February • March 	Quarter 2: Due July 20th <ul style="list-style-type: none"> • April • May • June
Quarter 3: Due October 20th <ul style="list-style-type: none"> • July • August • September 	Quarter 4: Due January 20th <ul style="list-style-type: none"> • October • November • December

The payment schedule will remain in effect unless a written request is sent into the Real County Tax Office to change the payment schedule back to monthly. I understand that I am held responsible for keeping up with my payment date and that a late payment may result in a delinquent fee.

Signature:	Printed Name:
Date:	