

**City of Emeryville**  
**UTILITY USERS TAX REMITTANCE FORM**

Name of Utility Service Provider: \_\_\_\_\_

Name of Billing Agent (if any): \_\_\_\_\_

Type of Utility Service(s): \_\_\_\_\_  
(Gas, electricity, wired or wireless telephone, private communication services, or bundles thereof)

Company FEIN No.: \_\_\_\_\_ Remitted by ACH \_\_\_\_\_

Tax Period Covered\*: \_\_\_\_\_

*The information that you provide in this remittance form will be maintained as confidential under Rev. and Tax. Code § 7284.6.*

Gross Charges: \$ \_\_\_\_\_

Deductions: \$ \_\_\_\_\_  
[Taxes, Resale sales, Exempt  
Accounts]

Non-standard Adjustments\*\*: \$ \_\_\_\_\_

Net Taxable Charges: \$ \_\_\_\_\_

Tax Percentage Applied: \_\_\_\_\_ %

- Electricity-5.5%
- Gas-5.5%
- Telecom-5.5%

Penalties: \$ \_\_\_\_\_

Interest: \$ \_\_\_\_\_

Total Remittance: \$ \_\_\_\_\_

Remit to:     **ATTN: Finance Department**  
                  **City of Emeryville**  
                  **1333 Park Avenue**  
                  **Emeryville, CA 94608**

Please note that payment must be received by the City by no later than the twentieth day of the following month (due date). Penalties (15%) and interest will be imposed on delinquent payments.

\*Please prepare a separate remittance form for each tax period; do not combine tax periods.

\*\*Please describe any non-standard adjustments: \_\_\_\_\_

\_\_\_\_\_