



**CITY OF CARSON
REVENUE DIVISION**

701 East Carson Street • P. O. Box 6234 • Carson, CA 90749
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E-mail Address: revenuediv@e-mail.carson.ca.us

TRASH & SOLID WASTE COLLECTION GROSS RECEIPTS FEE

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Due Date:

Payment must be received before (date), to avoid delinquent penalty assessment.

1.	Total Gross Receipts*	\$	(1)
2.	Tax rate (2%)		× 0.02 (2)
3.	2% Gross Receipts Fees [Amount in line (1) x 0.02] =	\$	(3)
Delinquent payment, please add:			
4.	Penalty rate (25%)..... Amount in line (3) \$_____ x 0.25 =	\$	(4)
5.	Total Remittance:[Amount in line (3) + line (4)] =	\$	(5)

- A. Total tons of refused collected _____
- B. Number of commercial/industrial premises served
..... _____
- C. Number of collections missed
..... _____

I declare under penalty of perjury that, to the best of my knowledge, all statements contained herein are true, correct and complete.

SIGNATURE

DATE

TITLE

***NOTE:** Gross Receipts Fee remittance mandated by Section 5221 of the Carson Municipal Code and established by Resolution No. 92-032.

Total Gross Receipts **received** from all commercial/industrial premises within the City of Carson during the reporting period. The Gross Receipts Fee shall not apply to the collection of separated recyclable materials.