

**Town of Iva**  
P.O. Box 188  
Iva, South Carolina 29655

**Hospitality Tax Fee Remittance Form**

Business Name \_\_\_\_\_ Month: \_\_\_\_\_ Due Date: \_\_\_\_\_

Business Address	GORSS PROCEEDS	\$ _____
_____	2% of Gross Proceeds	\$ _____
_____	+ 5% penalty if late	\$ _____
_____	<b>TOTAL DUE</b>	<b>\$ _____</b>

**SIGNATURE:** \_\_\_\_\_

I HEREBY CERTIFY THAT I HAVE EXAMINED THIS RETURN AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IT IS A TRUE AND COMPLETE RETURN.

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REMIT TO: Town of Iva  
P.O. Box 188  
Iva, South Carolina 29655

For any related questions concerning this remittance, contact: Town of Iva  
1-864-348-6193