

COUNTY OF HENRY, VIRGINIA

Commissioner of Revenue

Post Office Box 1077

Collinsville, Virginia 24078

**OCCUPANCY TAX
REMITTANCE FORM**

Month of _____

SSN / FIN Number _____

Due by 20th of Following Month

Name and Address of Business:

Telephone Number _____

Business location if other than above:

Rentals Subject to Tax

Tax on Rentals at 2%

Authorized

Signature _____

Date: _____

Make Check Payable to: County of Henry, VA