



CHESTERFIELD COUNTY, VIRGINIA

RETURN OF CONSUMER UTILITIES TAX

Federal ID # _____	TAX REPORT FOR MONTH ENDING _____ 20 _____
Name of Taxpayer: _____	
Trade Name: _____	
Mailing Address: _____ _____	
Telephone Number: _____ E-mail: _____	

Pursuant to §§ 9-171 and 172 of the Chesterfield County Code, a tax is imposed on consumers of telephone, electric and gas utility services. **TAXES MUST BE COLLECTED AND REMITTED BY THE LAST DAY OF THE MONTH FOLLOWING THE MONTH OF COLLECTION (electric and gas service) OR BILLING (telephone service).** Pursuant to § 9-141 of the Chesterfield County Code, a tax is imposed on purchasers of telephone service for the E-911 system. **TAXES MUST BE COLLECTED AND REMITTED BY THE LAST DAY OF THE MONTH FOLLOWING THE MONTH OF BILLING.**

Electric Utility Service (Rates and limitations listed are per consumer)	Form #
Total Gross Receipts \$ _____	
Number of Residential Consumers _____ Tax (\$1.40 plus \$.015062 per kWh, not to exceed \$2.00)	\$ _____ 131
Number of Commercial Consumers _____ Tax (\$1.15 plus \$.007023 on the first 2,684 kWh, \$.000508 on 2,685 to 195,597 kWh, and \$.000367 on remaining balance)	\$ _____ 131
Number of Industrial Consumers _____ Tax (\$1.15 plus \$.010995 on the first 1,714 kWh, \$.000758 on 1,715 to 131,002 kWh, and \$.000167 on remaining balance)	\$ _____ 131
Gas Utility Service (Rates and limitations listed are per consumer)	
Total Gross Receipts \$ _____	
Number of Residential Consumers _____ Tax (\$2.00 per month)	\$ _____ 134
Number of Non-residential Consumers _____ Tax (\$2.00 plus \$.010010 on the first 50,000 CCF plus \$.00005 on the remaining balance delivered monthly)	\$ _____ 134
Telephone Utility Service (Rates and limitations listed are per consumer)	
Total Gross Receipts \$ _____	
Number of Residential Consumers _____ Tax (20% of monthly bill, not to exceed \$2.00)	\$ _____ 130
Number of Commercial Consumers _____ Tax (10% of first \$200, plus 1% of amount between \$201 and \$10,000, plus .5% of the balance of the monthly bill)	\$ _____ 130
No. of mobile telecommunications lines _____ Tax (10% of gross monthly charges per line, not to exceed \$3.00 per line)	\$ _____ 211
E-911 Service: For the month of _____, 20 _____	
Total Gross Receipts \$ _____	
Number of telecommunication lines _____ Tax (\$2.00 per telephone line per month)	\$ _____ 158
Late Payment Penalty (10% of the tax due or \$10.00, whichever is greater)	\$ _____
Interest (10% per annum, calculated upon the total of the delinquent tax plus late payment penalty)	\$ _____
Total Due	\$ _____

I, the undersigned taxpayer, do swear (or affirm) that the foregoing figures and statements are true, full, and correct to the best of my knowledge and belief.

Signature of Taxpayer Date

Please print name of person signing this form

RETURN TO: OFFICE OF THE COMMISSIONER OF THE REVENUE
P.O. BOX 124, CHESTERFIELD, VA 23832-0908
(804) 748-1281
cor@chesterfield.gov

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