CITY OF RIVERSIDE, CALIFORNIA
UTILITY USER’S TAX RETURN

For Questions regarding Utility User’s Tax Returns call (951) 826-5884
Note: Remittance due on or before 20th day of the following month
Remittance should be made payable to: CITY OF RIVERSIDE

Authority: Section 3.14. Municipal Code of the City of Riverside

<table>
<thead>
<tr>
<th>Please check appropriate box:</th>
<th>Water ☐</th>
<th>Gas ☐</th>
<th>Electric ☐</th>
<th>Telephone ☐</th>
<th>Cable TV ☐</th>
</tr>
</thead>
</table>

Service Supplier: FEIN #:

Reporting Period:

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gross Revenue:</td>
<td>$</td>
</tr>
<tr>
<td>Adjustments (Specify Below):</td>
<td>$</td>
</tr>
<tr>
<td>Adjusted Gross Revenue:</td>
<td>$</td>
</tr>
<tr>
<td>Remittance at 6.5% of Adjusted Gross Revenue:</td>
<td>$</td>
</tr>
<tr>
<td>Penalty for delinquent utility user’s tax assessed previous month:</td>
<td>$</td>
</tr>
</tbody>
</table>

Return remittance with this form to:
CITY OF RIVERSIDE - CITY MGR/FINANCE
3900 MAIN STREET - 6TH FLOOR
RIVERSIDE, CALIFORNIA 92522

Total Remittance Due: $  

Explanation or justification for adjustments, if any.

Service Supplier Contact Person: ____________________________ Phone No. ____________________________

I declare under penalty of making a false statement that to the best of my knowledge and belief, the statements herein are correct and true.

Signature ______________ Title ______________ Date ______________

NOTICE OF DELINQUENT UTILITY USERS TAX

Date Utility User's Tax received: ____________________________ Number of Days Late: ______________

Penalty assessed per Section 3.14.100 at 15% $ ____________________________

Remit this penalty with next month’s return. Thank you.

Form: UUT Return Form - Revised 9/07/05