



**City of North Chicago  
Storage Facility Accommodation Tax Return  
Remittance Form**

City of North Chicago Ordinance 2010-60 establishes a Storage Facility Accommodation Tax. This return must be filed and all taxes due must be remitted no later than the 20th day of each month following the end of the month filing period.

Month and Year of Collection \_\_\_\_\_

**Payee Name, Address and Telephone**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Local Business Name, Address & Telephone**

\_\_\_\_\_  
\_\_\_\_\_  
North Chicago, IL 60064  
(847) \_\_\_\_\_  
  
IBT Number for this location (from Illinois DOR ST-1) \_\_\_\_\_  
  
N.C. Business License No. \_\_\_\_\_

<b>Step 1</b>	Gross Monthly Rental or Lease Amount	\$ _____ (1)
<b>Step 2</b>	Calculate tax (Line 1 x 0.05*)	\$ _____ (2)
<b>Step 3</b>	Calculate late payment penalty(s), if any:	
	a) Late Payment Penalty (Line 2 x 0.05)	\$ _____ (3a)
	b) Interest Charge (Line 2 x 0.01 per month)	\$ _____ (3b)
	c) Late Filing Penalty (Line 2 x 0.05)	\$ _____ (3c)
<b>Step 4</b>	Subtotal of penalties (add Lines 3a to 3c)	\$ _____ (4)
<b>Step 5</b>	Total tax, interest & penalty due (add lines 2 and 3)	\$ _____ (5)

*\*The 2010 tax rate is 3%. The rate increases to 4% effective June 1, 2011 and 5% effective June 1, 2012.*

Under penalties of perjury and other penalties provided by law. I declare that I have examined this return and to the best of my knowledge and belief it is true, correct and complete. I further declare that the information set forth is taken from the books and records of the business for which the return is filed.

Signature of Preparer \_\_\_\_\_

Date \_\_\_\_\_

Signature of Taxpayer \_\_\_\_\_

Date \_\_\_\_\_

Mail this completed return and payment check for the amount shown in Line (5) to:

Comptroller's Office  
City of North Chicago  
1850 Lewis Avenue  
North Chicago IL 60064