



Utility User Tax Remittance Form

HdL Account Number: _____

FEIN: _____

The City of Riverside requires that all Service Providers report Utility User Tax (UUT) via a UUT Return. The recommended method of filing is online. To file online, please visit <https://Riverside.hdlgov.com>. If you are unable to file online, please complete the form below and mail the return and payment to:

City of Riverside
UUT Processing Center
8839 N. Cedar Ave. #212 • Fresno, CA 93720

Service Provider Information

**All contact information is required.*

Name _____
Address _____
City _____ State _____ Zip _____
Company Contact _____
Phone Number _____
Email Address _____

Third-Party Tax Service Provider (if applicable)

Name _____
Mailing Address _____
City _____ State _____ Zip _____
Primary Contact _____
Phone Number _____
Email Address _____

Note from the tax administrator: *The filing frequency of your return must be consistent with the filing cycle on record. Changing your filing cycle or combining periods on a single return may require resubmission of your tax return. Additionally, you may be required to file based on your total annual remittance to the City. Annual filers (total annual tax less than \$10,000). Quarterly filers (total annual tax greater or equal to \$10,000 but less than or equal to \$100,000). Monthly filers (total annual tax greater than \$100,000).*

Reporting Period _____ Monthly Quarterly Annual (End of June) Annual (End of December)

If this is your Final Filing please check the box

Service Type	Gross Charges	Deductions	Non-Standard Adjustments	Net Taxable Charges	Tax Rate	Tax Amount
Cable					6.5%	\$
Video					6.5%	\$
Electricity					6.5%	\$
Gas					6.5%	\$
VOIP					6.5%	\$
Wireless					6.5%	\$
Wireline (Wired)					6.5%	\$
Prepaid Wireless (MTS)					6.5%	\$
Water					6.5%	\$

Please note that payment must be received by the City no later than the twentieth (20th) day of the month following the reporting period.

UUT Penalty: Subtotal X 15% (or .15) applied if not paid by the due date.

Subtotal \$ _____
Penalties (15%) _____
Total Due \$ _____

I declare, under penalty of perjury, that to the best of my knowledge and belief, the statements herein and any attachments hereto are true and correct.

Signature _____

Date _____

Print Name _____

Title _____