



CITY OF CHESAPEAKE, VIRGINIA  
 Commissioner of the Revenue

Return To: Commissioner of Revenue Business Tax Dept.  
 P.O. Box 15285  
 Chesapeake, VA 23328-5285  
 757-382-6738; 757-382-6739; 757-382-8822 fax  
 email: bustax@cityofchesapeake.net

**ADMISSION TAX REPORT**

ACCOUNT #:	MONTH/YEAR	DUE DATE

Trade Address:		1. GROSS RECEIPTS SUBJECT TO TAX	
Mailing Address:		2. EXEMPT SALES	
APPLICANT		3. NET RECEIPTS SUBJECT TO TAX	
C/O if indicated		4. TAX: 10% OF LINE 3	
TRADE NAME		5. PENALTY 5% (per month) of line 4	
STREET		6. TOTAL TAX DUE	
CITY, STATE, ZIP CODE			

\_\_\_\_\_ CERTIFIED SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**Return Due and Payable On or Before 20th Day of Reporting Month**  
**MAKE CHECKS PAYABLE TO "CITY OF CHESAPEAKE"** (YOUR CHECK IS YOUR RECEIPT)

Complete and Return Upper Portion with Payment - Retain Lower Portion for Your Records

**CALCULATING RECEIPTS SUBJECT TO TAX:**

- Gross Admission receipts (Total sales for reporting month)
- Deduct Virginia State Sales Tax collected (6%)
- Deduct City Admission Tax collected (10%)

1. **GROSS RECEIPTS SUBJECT TO CITY ADMISSION TAX**
2. **Deduct any exempt sales (Certificates on file)**
3. **NET RECEIPTS SUBJECT TO CITY ADMISSION TAX**
4. **Multiply line 3 by .10 (10%) = Tax Amount Due**

*If remitting late payment after the 20th of the month deadline:*

5. **Multiply the tax amount due (line 4) by .05 (5%) = Penalty**
6. **Add line 5 to line 4 and remit Total Tax due**


If you have any questions, please contact the Commissioner of the Revenue's Office  
 757-382-6738; 757-382-6739; bustax@cityofchesapeake.net