



MUNICIPAL MOTOR FUEL TAX REMITTANCE FORM

Due Date: On or before the 20th of Prior Month
(e.g. Fuel Tax Sales for month of March is due by April 20th)

For Tax Period Ending: _____

BUSINESS Name or DBA: _____

BUSINESS Address: _____

Business Phone Number: _____

COMPUTATION OF TAX LIABILITY:

1. Total Gallons of Motor Fuel Sold	_____ Gallons
2. Schaumburg Motor Fuel Tax (line 1 x \$0.03)	\$ _____
3. Late Filing Penalty (line 2 multiplied by 5.0% per month, if paid after due date)	\$ _____
4. Late Payment Penalty (line 2 multiplied by 5.0% per month, if paid after due date)	\$ _____
5. Interest (1.0% of line 2 per month, if paid after due date)	\$ _____
6. Total Penalties and Interest Due (Sum of lines 3,4 and 5)	\$ _____
7. Total Amount Due the Village of Schaumburg (Sum of lines 2 and 6)	\$ _____

REMITTANCE INSTRUCTIONS:

- Please submit this completed form, along with the payment amount due shown on line 6.
- Attach a copy of the Illinois Department of Revenue Sales and Use Tax Return (ST-1) or County Motor Fuel Tax form (CMFT-1/CMFT -2), for the corresponding reporting period.
- Payment must be received by the Village, on or before the 20th of the prior month (e.g. Fuel Tax Sales for month of March is due by April 20th).
- Fuel tax remittance forms and payments that are not received by the due date, or are postmarked after the due date, are subject to a late filing penalty, late payment penalty and interest fee (sum of lines 3,4 and 5 above).
- All forms of payment (cash, credit card, and check) will be accepted at the Village of Schaumburg, Finance Dept during normal business hours (Mon-Fri, 8AM - 6PM), or online at [www.VillageofSchaumburg.com website](http://www.VillageofSchaumburg.com).
- Checks should be made payable to the Village of Schaumburg and sent to the Village of Schaumburg Finance Dept., 101 Schaumburg Court, Schaumburg, 60193.

Under penalties provided by ordinance, I hereby affirm that the statements contained herein are taken from the books and records of the above business and are true and correct to the best of my knowledge.

Printed Name of Preparer: _____ Title: _____

Signature of Preparer: _____ Date: _____

Email: _____ Phone Number: _____

Any questions should be directed to the Finance Department at 847.923.4532.