

COMMERCIAL WASTE PROGRAM FRANCHISE FEES

YEAR: _____ QUARTER: _____

QUARTER 1: JAN-MAR - DUE BY APR 30 QUARTER 2: APR-JUN - DUE BY JUL 30
QUARTER 3: JUL-SEP - DUE BY OCT 30 QUARTER 4: OCT-DEC - DUE BY JAN 30

Company Name: _____

Address: _____

Phone: _____ Email: _____

Did your franchise complete commercial waste services within the City of Cincinnati this quarter?

Yes No

If Yes, please complete the remainder of this form and remit your franchise fee payment.

| | | |
|---------------------------------------------------------|---------------------------------------|-----------------|
| 1. Total Gross Revenue ⁱ | | \$ _____ |
| 2. Recycling Services Gross Revenue ⁱⁱ | | \$ _____ |
| 3. Commercial Waste Services Gross Revenue | <i>Must equal Line 1 minus Line 2</i> | \$ _____ |
| 4. Bad Debts Written Off ⁱⁱⁱ | | \$ _____ |
| 5. Adjusted Landfilled Gross Revenue | <i>Must equal Line 3 minus Line 4</i> | \$ _____ |
| 6. 20% of Adjusted Landfilled Gross Revenue | <i>Must equal Line 5 x 0.2</i> | \$ _____ |
| Franchise Fee Remitted This Quarter^{iv} | <i>Must equal Line 6</i> | \$ _____ |

Under penalties of perjury, I declare that I have examined this return and the records substantiating the above allowable deductions, and to the best of my knowledge and belief, it is true, correct, and complete.

Signed: _____

Printed Name: _____

Date: _____

File this form with the **OES, 801 Plum St, Ste 130, Cincinnati, OH 45202** by the applicable due date noted above.

Make all checks payable to the **Treasurer, City of Cincinnati**.

Questions? Contact Howard.Miller@Cincinnati-oh.gov or Jennifer.Ballard@Cincinnati-oh.gov.

ⁱ *Total Gross Revenue*: Total invoiced amount to customers for commercial waste services and recycling services performed in the city for the quarter. This includes any and all passed-through franchise fees for commercial waste services.

ⁱⁱ *Recycling Services Gross Revenue*: Recycling services are exempt from the franchise fee but gross revenue must be reported.

ⁱⁱⁱ *Bad Debts Written Off*: In accordance with Generally Accepted Accounting Principles (GAAP) issued by the Financial Accounting Standards Board (FASB).

^{iv} *Franchise Fee*: Refer to Cincinnati Municipal Code (CMC) 730 for details on the franchise fee and penalties for not filing on time.