



175 East Third Street  
P.O. Box 128  
Palisade, CO 81526

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[www.palisade.colorado.gov](http://www.palisade.colorado.gov)

**SHORT TERM VACATION RENTAL LODGING FEE REPORT**

SHORT TERM VACATION RENTAL ADDRESS: \_\_\_\_\_

REPORT FOR MONTH OF: \_\_\_\_\_ YEAR: \_\_\_\_\_

**BEDROOM # 1**  
NUMBER OF DAYS RENTED: \_\_\_\_\_ x \$2.00 = \_\_\_\_\_

**BEDROOM # 2**  
NUMBER OF DAYS RENTED: \_\_\_\_\_ x \$2.00 = \_\_\_\_\_

**BEDROOM # 3**  
NUMBER OF DAYS RENTED: \_\_\_\_\_ x \$2.00 = \_\_\_\_\_

**BEDROOM # 4**  
NUMBER OF DAYS RENTED: \_\_\_\_\_ x \$2.00 = \_\_\_\_\_

**Reports and payments are due the 20th of each month following the period in which fees were collected. Reports are required, even if no rooms were rented.**

Late Fees - if reports and/or payments are received after the 20th, a single late fee per report of \$10.00 or 10% (whichever is greater) will apply.

**LATE FEE (if applicable)**      \$ \_\_\_\_\_      **TOTAL**      \$ \_\_\_\_\_

I declare under penalty of perjury that the statements made herein are, to the best of my knowledge, true and accurate.

Signed Rental Owner: \_\_\_\_\_ Date: \_\_\_\_\_

Please sign and return this document with payment to:  
The Town of Palisade  
175 E 3rd Street  
PO Box 128  
Palisade, CO 81526

Please email the Town of Palisade finance department with any questions: [finance@townofpalisade.org](mailto:finance@townofpalisade.org)