

FORM 2
[See rule 3(3)(c)]

**Daily account of occupancy of residential accommodation (room) in hotel
and collection of tax**

Name and Address of Establishment:

Registration No.:

S. No.	Name of the Guest	Age	Nationality	Room No./Name of room occupied	Rate of charges for accommodation for residence per day	Arrival date and time	Departure date and time
1.	2.	3.	4.	5.	6.	7.	8.

Period of stay of each guest	Total amount of charges for accommodation for residence	Charges paid by guest in Indian or foreign currency	No. of guests who occupied the room or accommodation in hotel	Bill/Cash Memo No. and date	Amount of Luxury Tax collected	Remarks
9.	10	11.	12.	13.	14.	15.

Signature.....
Name.....
Designation.....

Date:

I,(name) resident of
do hereby solemnly affirm and say that the contents of the above Form are true to the best of my knowledge and belief.

Signature of Proprietor

Place:
Date: