

CITY OF UNALASKA

PO BOX 610 UNALASKA, AK 99685 Phone (907) 581-1251 Fax (907) 581-1417

www.ci.unalaska.ak.us

Enhanced 911 System Surcharge Return

Reports must be filed on or before 60 days after the end of the month in which the amount was collected.

Month		Year	
NAME: ADDRESS:		BUSINESS LIC. #	
		_	
1. Amount of gross E911 surcharge billed for			
\$	+ \$ (Wireless)	<u> </u>	
(Land line	es) (Wireless)		
2. Less E911 amounts claimed for the surcharges previously billed and remitted, but charged off as uncollectible:			
but charged on as unconectible.			
3. Plus Amount of prorated net recoveries collected this month:		3. <u>\$</u>	
4. Subtotal:		4. \$	
5 1 6 19 6 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	I. 11.		
5. Less: Credit for administrative costs: (if applicable) Greater of \$150.00 or 1% of line 4.		5. \$	
Applicable only if a properly fil			
to the City of Unalaska on or be in which the E911 system surch	efore 60 days following the e		
6. Net amount to be remitted with this retur	n:	6. <u>\$</u>	_
I CERTIFY THAT THE INFORMATION PROVIDE	ED IS TRUE AND CORRECT.		
SIGNATURE	TITLE		DATE
PRINTED NAME	EMAIL ADDRESS		