



CITY OF AVALON
P.O. Box 707
Avalon, CA 90704
(310) 510-0220

REPORT OF WHARFAGE FEES

Business Name: _____

Mailing Address: _____

Check Reporting Month

Reporting Period	January 2022	May 2022	September 2022
By Month	February 2022	June 2022	October 2022
	March 2022	July 2022	November 2022
	April 2022	August 2022	December 2022

Fees shall be paid on or before the last day of the month immediately following each calendar month.

1. Total Number of Passengers Landed..... _____
2. Total Number of Passengers Embarked..... _____
3. Total Number of Passengers subject to Wharfage Fee (Line 1 plus Line 2)..... _____
4. TOTAL WHARFAGE DUE (Total on Line 3 times \$3.00) \$ _____
5. MEASURE H. PROVISION (Total on Line 1 times \$0.50 per passenger)..... \$ _____

LATE PAYMENT: If the payment is not received by the last day of the month immediately following the reporting period (ie: reporting for the month of May is due June 30), add a 10% penalty, plus interest at the rate of ½ of 1% (.005) per month or prtion thereof, from the date the Wharfage Fee becomes delinquent.

6. PENALTY AND INTEREST FOR LATE PAYMENT (if applicable)

PENALTY.....	\$ _____
INTEREST.....	\$ _____
7. TOTAL AMOUNT DUE AND PAYABLE (Line 4 plus, Line 5, plus Line 6)\$ _____

Please make Check Payable to City of Avalon

I declare under penalty of perjury that I am authorized to make this statement, and that to the best of my knowledge and belief it is a true, correct and complete statement made in good faith for the period stated, in compliance with the provisions of Title 10, Article 4, Chapter 2, of the Avalon Municipal Code.

Signature of Operator or Agent	Date Report Submitted
---------------------------------------	------------------------------