



City of Newport News, Virginia
PUBLIC RIGHTS-OF-WAY USE FEE
QUARTERLY REMITTANCE

Along with this form, remit payment to: Commissioner of the Revenue Attn: COR - Related Tax Department 2400 Washington Avenue Newport News, VA 23607-4389	<i>For assistance call (757) 926-8644 or fax us at (757) 247-2628. You may visit us at our website at www.nngov.com/cor</i>
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Name of Company: _____ Address: _____ City: _____ State: _____ Zip code: _____	Federal ID Number: _____
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Due Date: Two months after the end of each quarter in which the fee has been billed to ultimate end users as follows:

1st Quarter: Jan. - Mar., due May 31st	3rd Quarter: Jul. - Sept. due Nov. 30th
2nd Quarter: Apr. - June, due Aug. 31st	4th Quarter: Oct. - Dec. due Feb. 28th.

Please complete the following calculation for which you are remitting payment. Attach an itemized listing of all deductions and additions to the total fees billed.

<u>PUBLIC RIGHTS-OF-WAY USE FEE:</u>			
<u>Newport News City Ordinance 5258-99</u>			
<u>Code of Virginia §56-468.1 (includes definition of an access line).</u>			
<i>Rates are as follows:</i> Effective July 1, 2009: \$0.89 per access line, per month <i>July 2008 thru June 2009: \$0.72 per access line, per month</i> <i>July 2007 thru June 2008: \$0.67 per access line, per month</i> <i>July 2006 thru June 2007: \$0.64 per access line, per month</i> <i>July 2005 thru June 2006: \$0.61 per access line, per month</i>			
Month Billed to End Users	Total Number of access lines	Tax rate	Total Fees Billed
		\$____ per access line, per month	\$
		\$____ per access line, per month	\$
		\$____ per access line, per month	\$
<i>Deductions</i>			\$
<i>Additions</i>			\$
TOTAL FEES REMITTED			\$

DECLARATION: I declare that the statements and figures herein given are true, full and correct to the best of my knowledge and belief.	
_____ SIGNATURE	_____ DATE
_____ TITLE	() _____ TELEPHONE NUMBER