

**VILLAGE OF WILLOWBROOK**  
**835 MIDWAY DRIVE**  
**WILLOWBROOK, IL 60527**  
**(630) 323-8215**

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**MONTHLY SELF-STORAGE TAX RETURN**

Business Name: \_\_\_\_\_

Doing Business As: \_\_\_\_\_

Reporting Period (Mo/Yr): \_\_\_\_\_

FEIN: \_\_\_\_\_

**Tax and returns are due by the 15<sup>th</sup> day of each month to avoid penalties.**

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1.	Gross Receipts during the month upon which the tax is imposed:	\$ _____
2.	Amount of Tax (Multiply Line 1 by <b>5%</b> (.05))	\$ _____
3.	Total Payment Due	\$ _____

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- The Village must receive payment by the 15<sup>th</sup> day of the month following the reporting period (i.e. March tax is due by April 15<sup>th</sup>).
- Self-storage tax remittance forms and payments that are not received by the due date, or are postmarked after the due date, are subject to a late filing penalty and interest fee.
- A penalty of **3%** will be assessed on the last day of the month when the return is due, and for each subsequent month until all outstanding amounts are paid in full. (Ordinance 19-0-30, 11-25-2019)
- Please make checks payable to the “**Village of Willowbrook**” and mail your return and tax payment to the Village of Willowbrook, at the address listed above. Cash or check is also accepted at the Village of Willowbrook Village Hall during normal business hours.
- Include a copy of the Illinois Department of Revenue Sales & Use Tax Return (ST-1).

Under penalties as provided by law, I declare that to the best of my knowledge and belief, the information on this return is true, correct, and complete.

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Signature

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Date

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Printed Name & Title

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Phone Number