



City of Irrigon

P.O. Box 428, Irrigon, Oregon 97844
Phone: (541)922-3047 – Fax (541)922-9322
ci.irrigon.or.us

Quarter Ending: _____

Due Date: _____

REQUEST FOR EXTENSION

I request an extension of one month to file my Transient Lodging Tax return. I will file my return by _____. I understand there will be an additional fee of 1% of the tax due.

Reason for extension request:

Business: _____

Signature: _____

Printed Name: _____

Date: _____

For Office Use Only

Date Received: _____ Certificate No. _____

Approved by: _____