



Short-Term Rental (STR) User Fee Check Payment Form

Submit this form and payment to:
DEPARTMENT OF FINANCE
2051 KAEN ROAD OREGON CITY, OR
97045
(503) 742-5400

ALL FIELDS REQUIRED

STR Account #

Period Dates Paid:

ADDRESS:

EMAIL:

Enter GROSS receipt total for period:

STR User Fee Due (line 1x 0.85%)

I CERTIFY UNDER PENALTY OF PERJURY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

NAME

DATE

PLEASE MAKE CHECK PAYABLE TO "CLACKAMAS COUNTY" AND REFERENCE STR NUMBER ON PAYMENT