

The Corporation of the
Town of Blind River



Municipal
Accommodation
Tax Remittance
Report

Tax Return Form

By-Law 26-32

Accommodation Establishment		
Establishment Name:		
Establishment Address:		
Mailing Address (if different):		
City:		Postal Code:
Contact Name:	Contact Phone Number:	Contact Email:

Monthly Reporting Period		
YYYY/MM/DD	TO	YYYY/MM/DD

Municipal Accommodation Tax Collection:		
	(if no revenue was earned, enter "0")	
Total Accommodation Revenue collected for above reporting period		A
Less Exemptions		B
Less Adjustments		C
Total Accommodation Revenue	(D=A-B-C)	D
Municipal Accommodation Tax (4%)	(E=D*0.04)	E
Number of Rooms/Nights sold		F

Explanations of Exemptions and/or Adjustments
*please include reason for the exemption and/or adjustment to the reporting period it pertains to.
Claimant Declaration:
*I certify that the above information on this form and any applicable attachments are true, complete and accurate.
Name:
Title:
Signature:
Date:

** Form and payment must be received by the Town of Blind River by the last day of the month following the reporting period. The quarterly schedules are as follows:

- January 1st and March 31st, will be due on or before April 30th.
- April 1st and June 30th, will be due on or before July 31st.
- July 1st and September 30th, will be due on or before October 31st.
- October 1st and December 31st, will be due on or before January 31st.

Instructions on Completing Municipal Accommodation Tax Remittance Report:

1. The Municipal Accommodation Tax Return Form **must be** submitted on a quarterly basis. It is due on the last day of the following month. (Example: January - March return due by April 30th.)
2. Accommodation Provider Information: Please enter the name of the establishment, property location, contact name, number and email address.
3. Quarterly Period: Please enter the quarter that the return relates to.
4. Adjustments: Include an explanation of the adjustments/exemptions to the reporting period it relates to.

Payment and Remittance Form Submission:

In Person:
 Town of Blind River
 11 Hudson Street, Blind River, ON P0R 1B0
 Hours: Mon-Fri 10:00 am to 4:00 pm
 Payment Option: Cash, Debit, Cheque.

By Mail:
 The Corporation of the Town of Blind River
 P.O. Box 640, Blind River, ON, P0R 1B0
 Payment Options: Cheque or money order.

By E-Transfer:
 etransfer@blindriver.ca
 *Please indicate in memo section
 your business name and "MAT"

For other enquiries please contact:
 info@blindriver.ca