

Name of Establishment

Municipal Accommodation Tax Collection

Municipal Accommodation Tax Remittance Form

Legal Name

(Pursuant to By-Law No. 2018-104)

Important: A Municipal Accommodation Tax Remittance form for Hotels, Motels, Inns and resorts must be completed and received by the City by the last day of every month for the previous month's reporting period even if no tax was collected. For example: January's tax return (January 1st to January 31st) must be received by February 28th.

For VRU's and B&B a Municipal Accommodation Tax Remittance form must be completed and received by the City by the last day of month following a 3 month period reporting period even if no tax was collected. For example: January's to March's tax return (January 1st to March 31st) must be received by April 30th.

Late payment charges will be charged on outstanding balances at a rate of 1.25% on the first day of default and on each month thereafter in which the default continues. Additional form instructions on page two. Remittance form available online at niagarafalls.ca/municipalaccommodationtax.

Property Address	Contact Name
Email Address	Contact Phone Number
Monthly Reporting Period	
Reporting Period From	Reporting Period To
MM/DD/YYYY	MM/DD/YYYY
Accommodation Establishment Informa	ation
Number of Room Nights Sold	
Municipal Accommodation Tax	x \$2.00
Total Amount of Municipal Accommodation Tax	Collected
Adjustments	
Total Amount of Municipal Accommodation Tax	Remitted
Adjustments	
Explanation of Adjustment (please include reason	for adjustment and to which reporting period it pertains)
Claimant Declaration	
I certify that the information on this form and any a	pplicable documents are true and correct.
o	me & Title Date (MM/DD/YYYY)
the purchase of transient accommodation in the City of Niagara	thority of By-law No. 2018–104. <i>A By-law to Imposable Municipal Accommodation Tax (MAT))</i> on a Falls. The personal information will be used for the administration of the TAT collection. ce Department, 4310 Queen Street, Niagara Falls, Ontario, L2E 6X5. Telephone 905-356-7521.

Instructions on Completing your Municipal Accommodation Tax Remittance Form

Accommodation Establishment Information

Enter the name of the establishment, property location, email address, customer name, contact name and contact phone.

Reporting Period

Enter the Period for which the return pertains to.

Municipal Accommodation Tax Calculation

- 1. Enter the number of rooms sold in the reporting period. If no tax was collected in the reporting period enter "NIL".
- 2. Multiply the number of rooms by the \$2 flat fee & enter the total amount of Municipal Accommodation Tax Collected.
- 3. Deduct the amount of adjustments in the reporting period & enter the amount Municipal Accommodation Tax remitted.
- 4. Supporting documents, such as a Property Management System Report, must be included with your remittance.

Adjustments

Please include an explanation of the adjustment (e.g. refunds) and to which reporting period the adjustment pertains to.

Payment and Form Submission Information

Form and payment must be received by the City by the last day of every month for the previous reporting period.

In Person

City of Niagara Falls 4310 Queen Street Finance Department Niagara Falls, ON L2E 6X5

Hours: 8:30 a.m. - 4:30 p.m., Monday to Friday

OR

MacBain Community Centre
7750 Montrose Road Customer Service Centre
Niagara Falls, ON

L2H 3N3

Hours: 8:30 a.m. – 4:30 p.m. Monday to Friday

By Electronic Fund Transfer (EFT)

To get set up for EFT please email payments@niagarafalls.ca.

For payments made by EFT, the form may be submitted by email to payments@niagarafalls.ca or alternatively be mailed.

Payment Options: Cash, Debit, Cheque

By Mail

City of Niagara Falls Finance Department 4310 Queen Street Niagara Falls, ON L2E 6X5

Attention: Municipal Accommodation Tax

Please make cheques payable to:

City of Niagara Falls

Payments made by mail or in person must include this form.