

Establishment Information:

# THE CORPORATION OF THE TOWN OF OAKVILLE 1225 Trafalgar Road

Oakville Ontario, L6H 0H3 Telephone: 905-845-6601 mat@oakville.ca

# Oakville Municipal Accommodation Tax Return Form

# LEGAL NAME: **BUSINESS NAME:** ADDRESS: CITY/TOWN: POSTAL CODE: TELEPHONE: **EMAIL ADDRESS:** MONTHLY REPORTING PERIOD: YYYY YYYY MM DD MM DD to **MUNICIPAL ACCOMMODATION TAX COLLECTION:** Accommodation Revenue for the above reporting period. If no revenue was collected in the reporting period enter "0" in Line "A" Less Exemptions (provide detail in Adjustments section below) C \_\_\_\_\_ Less Adjustments (provide detail in Adjustments section below) Total Accommodation Revenue (A-B-C) D \_\_\_\_\_ Amount of Municipal Accommodation Tax Collected and To Be Remitted Exemptions/Adjustments Explanation (please include reason for exemption/adjustment and to which reporting period it pertains to) Claimant Declaration I certify that the information on this form and any applicable attachment(s) are true and correct. Signature Date

Note: Personal information on this form is collected under the authority of the *Municipal Act, 2001* for the purposes of administering payment of accounts owing pursuant to the Municipal Accommodation Tax By-law 2018-137 to the Town of Oakville. Questions about this collection should be directed to Financial Operations at 1225 Trafalgar Road, Oakville, Ontario, L6H 0H3. Telephone 905-845-6601. Email <a href="mailto:mate">mat@oakville.ca</a>



# Instruction for Completing your Municipal Accommodation Tax Return Form

Enter the name(s) of the establishment, property address, email address, and contact phone.

# **Reporting Period**

Enter the month for which the return pertains.

### **Municipal Accommodation Tax Calculation**

In Box "A": Enter the amount of revenue received in the reporting period. If no tax was collected in the reporting period enter "0" in Box "A".

In Box "B": Enter the amount of exemptions in the reporting period.

In Box "C": Enter the amount of adjustments in the reporting period.

In Box "D": Deduct the amounts in Box "B" & "C" from Box "A".

In Box "E": Enter amount of the 4% Municipal Accommodation Tax collected.

# **Exemptions/Adjustments**

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

#### **Payment Due Date and Making Payments**

Tax return form and payment must be received by the Town of Oakville **by the 15**<sup>th</sup> **day of every month** for the previous month's reporting period. Late payments charges will be charged on outstanding balances at a rate of 1.25% on the first day of default, and the first of the month until paid.

### **Electronic Funds Transfer (EFT):**

To get set up for EFT please email us at <a href="mat@oakville.ca">mat@oakville.ca</a>. For payments made by EFT, the form should be submitted to <a href="mat@oakville.ca">mat@oakville.ca</a>

#### Payment by Cheque:

Town of Oakville Financial Operations Department 1225 Trafalgar Rd Oakville ON L6H 0H3

Please make cheques payable to "Town of Oakville"

#### For more information, please visit us at www.oakville.ca