Schedule B Municipal Accomodation Tax Remittance

Adopted Pursuant to By-Law 2025-18

P.O. Box 307 102 Durham St White River, ON P0M 3G0

Accomodation Establishment Information

Name of Provider	Business Number
Property Location	Contact Phone Number
Contact email	Contact Name

Reporting Period

Month	Day	Year		Month	Day	Year
			To			

Municipal Accomodation Tax Calculation

Accomodation Revenue for the above reporting period (if none, enter NIL)	A	
Exemptions (provide explanation below)	B	
Adjustments (provide explanation below)	C	
Total Accomodation Revenue Subject to Accomodation Tax	A-B-C= D	
Total Amount of Municipal Accomodation Tax Owing	Dx4% E	
Tax remitted on your behalf (Provide Agent/Internet booking platform(s) below)	F	
Total Amount of Municipal Accomodation Tax to be Remitted	E-F= G	

Explanation of Exemptions, Adjustments or Tax Remitted on your Behalf

Claimant Declaration

Date

Name:

The personal information on this form is requested pursuant to By-Law 2025-18 and is collected under the authority of the Municipal Act, S.O. 2001, c. 25. Questions about this collection can be forwarded to CAO/The Corporation of the Township of White River, P.O. Box 307, 102 Durham St, White River, ON. P0M3G0. Phone:807-822-2450 ext.206.

INSTRUCTION FOR COMPLETING YOUR MUNICIPAL ACCOMODATION TAX RETURN FORM

1. Reporting Period

Providers who collect and remit Harmonized Sales Tax (HST) to the Canada Revenue Agency monthly shall remit the Municipal Accommodation Tax (MAT) monthly. The Provider must remit the amount collected or collectible for the previous month on or before the last day of the current month and submit the Municipal Accommodation Tax Return Form (Schedule B) to the Township at that time.

Providers who collect and remit HST on a quarterly or annual basis, or who are not registered to collect and remit HST to the Canada Revenue Agency, shall remit the Municipal Accommodation Tax on a quarterly basis. The Provider must remit the amount collected or collectible for the previous quarter on or before the last day of the month following the end of the quarter and submit the Municipal Accommodation Tax Return Form (Schedule B) to the Township at that time.

2. Municipal Accommodation Tax Calculation

Box A: Enter the total revenue for the reporting period. If no revenue was earned, enter "NIL."

Box B: Enter the total amount of exemptions claimed for the reporting period.

Box C: Enter the total amount of adjustments (e.g., refunds) claimed for the reporting period.

Box D: Subtract the amounts in Box B and Box C from Box A.

Box E: Multiply the amount in Box D by 4%. This is the Municipal Accommodation Tax (MAT) owing for the reporting period.

Box F: Enter the amount of MAT that has already been collected and remitted on your behalf by a third party (e.g., an agent or online booking platform).

Box G: Subtract the amount in Box F from the amount in Box E. This is the final amount that must be remitted to the Township.

3. Exemptions or Adjustments

Please provide a clear explanation for any exemptions, adjustments, or third-party tax remittances claimed. This includes, for example, exemptions for accommodations provided for a continuous period of 30 days or more, adjustments such as refunds, or taxes remitted on your behalf by a third party (e.g., an agent or online booking platform).

Please also indicate the reporting period to which each exemption, adjustment, or remittance applies.

4. Payment and Submission Information

The completed form and payment must be received by the Township no later than the last day of the month following the reporting period (i.e., the month of March is due by April 31st). Late payment charges will be applied to any outstanding balances, as prescribed.

Electronic Funds Transfer (EFT): To arrange EFT, please contact us at 807-822-2450 ext. 205.