

## Schedule A

# Accommodation Establishment Information

Adopted Pursuant to By-Law #74-2018

**Municipal  
Accommodation Tax**

501-34 Cumberland St. N.  
P.O. Box 800  
Thunder Bay (ON) P7C 5K4  
Tel: 807-625-8150  
Email: ctbmat@thunderbay.ca



**Important:** This Accommodation Establishment Information form must be completed by Providers who operate Accommodation Establishments within the City of Thunder Bay and must be submitted to the City 30 days after the Establishment commences operations.

It is the responsibility of the Provider to update and submit to the City within 30 days this form where there are any changes required to the information provided.

<b>Legal Name of Provider:</b>		
<b>Operating Name of Establishment:</b>		
<b>Legal Name of Property Owner:</b>	<b>Tax Roll Number:</b>	
<b>Property Location:</b>		
<b>Mailing Address (if different):</b>		
<b>Contact Name:</b>	<b>Contact Phone Number:</b>	<b>Contact Email:</b>
<b>Frequency of HST Remittance:</b> <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly    *Annual or <input type="checkbox"/> Other*       not registered	<b>Business Number:</b>	
	<b>Agent or Internet Booking Platform(s) Used:</b>	
<b>Business Year-End Date:</b>		
<b>Total Number of Rooms in Establishment:</b>		<b>Daily Room Rate:</b>
<b>Name:</b>		<b>Position:</b>
<b>Authorized Signature:</b>		<b>Date:</b>

The personal information on this form is requested pursuant to By-law 74/2018 and is collected under the authority of the *Municipal Act*, S.O. 2001, c. 25. Questions about this collection should be directed to c/o Municipal Accommodation Tax, The Corporation of the City of Thunder Bay, 500 Donald Street East, Thunder Bay Ontario, P7C 5K4. Telephone (807) 625-2555.