

Confidential Monthly Occupancy Report

Please submit completed forms within **SEVEN DAYS** after the end of each month

PROPERTY NAME AND LICENCE NUMBER
Property Name:
Licence Number:

REPORT FOR THE MONTH OF <input type="checkbox"/> , YEAR _____	
<input type="checkbox"/> January	<input type="checkbox"/> July
<input type="checkbox"/> February	<input type="checkbox"/> August
<input type="checkbox"/> March	<input type="checkbox"/> September
<input type="checkbox"/> April	<input type="checkbox"/> October
<input type="checkbox"/> May	<input type="checkbox"/> November
<input type="checkbox"/> June	<input type="checkbox"/> December

NUMBER OF RENTABLE UNITS
of units available this month _____
Typically, this is the number of units you are licensed to operate. However, if part of an establishment is closed, then these units should not be included as available during this period.

TRIP PURPOSE INFORMATION	
Vacationing	%
Business	%
Convention	%
Motorcoach	%
Other	%
TOTAL	100%

INTERNET:

<https://novascotiatourismagency.ca/monthly-occupancy-fixed-roof>

MAIL:

Research Section
Nova Scotia Tourism Agency
8 Water Street
PO Box 667
Windsor, NS B0N 2T0

FAX: (902) 798-6600

For more information:

Email: occupancystats@gov.ns.ca or Phone: (902) 798-6775

DAY	UNITS SOLD	NO. OF GUESTS
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		
16		
17		
18		
19		
20		
21		
22		
23		
24		
25		
26		
27		
28		
29		
30		
31		
TOTAL		

If the accommodation is a seasonal operation, please

Check on final return

CLOSED FOR THE SEASON

Signature of Authorized Person