

Sylvania Township/City of Sylvania JEDD I

6730 Monroe St Ste 202

Sylvania, OH 43560

Tax Account Registration Form

The information contained on this form is necessary to open any city tax accounts needed by your company. A response is required within five (5) days. Please correct your name and address if needed. The Sylvania Township/City of Sylvania JEDD I income tax rates are 1-1/2% for a payroll withholding and net profit. All information is confidential.

Business Name: _____

Business Mailing Address: _____

Email: _____ Phone: _____

Federal Identification number: _____

Check Federal Tax Form Filed:

1120____ 1040____ 1065____ 1120S____ 1041 Schedule C or 1099____ Schedule E____

Social Security number that Schedule C, 1099, or Schedule E will be filed under: _____

List name and address of owners: _____

Type of work performed: _____

Will you have sub-contractors: _____ If yes, please provide a list of their names and addresses.

Date operation started in Sylvania Township/City of Sylvania JEDD I: _____

Address of Sylvania Township/City of Sylvania JEDD I business location: _____

Date business year ends: _____

Are there now or will there be employees subject to income tax? _____ If so, please show payroll starting date: _____

Is this business an outgrowth of another? _____ If so, please provide the names of the business & owners: _____

Name and address to mail tax forms if different from the address provided above: _____
_____ email: _____

Name, address & phone number of person who prepares your tax forms: _____
_____ email: _____

I certify the above to be true and correct to the best of my knowledge.

Signed _____

Title _____

Date _____