



VILLAGE OF OAK HARBOR

Department of Taxation

146 Church Street
P.O. Box 232
OAK HARBOR, OHIO 43449-0232
(419) 898-1611
Fax (419) 898-3502

Kimberly M. Mehlow
Income Tax Administrator

For the purpose of our records please complete and return this questionnaire within ten (10) days. All information is confidential.

BUSINESS QUESTIONNAIRE

Date _____ Federal ID# _____

Name of Company _____

Address _____ City _____ State _____ Zip _____

Telephone Number (____) _____ Fax(____) _____

If above address is a branch office, give address of the main office. _____

***NATURE OF BUSINESS AND ADDRESS WHERE BUSINESS IS BEING CONDUCTED TO DETERMINE IF THERE IS A TAX LIABILITY TO THE VILLAGE OF OAK HARBOR.** _____

Accounting period used for Federal Income Tax Purposes: (Check one of the following)

Calendar Year ending December 31 _____ Fiscal Year Ending _____

Owner's Name and Address:

(a) If individual proprietorship, give owner's name and address:

Name _____

Address _____

City _____ State _____ Zip _____

(b) If Corporate subsidiary, give name and address of parent company main office:

Name _____

Address _____

City _____ State _____ Zip _____

(c) If partnership, association or other unincorporated joint business venture, list names and addresses of partners, associates or member in venture:

Name	Address	City	State	Zip
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***Not all Oak Harbor addresses have a tax liability to the Village of Oak Harbor Income Tax.**

Do you operate any other businesses within the Village of Oak Harbor? If so, list those located within the Village:

Does the business occupy real property within the Village of Oak Harbor rented from others? If so, to whom is rent paid?

Number of employees within the Village of Oak Harbor _____

***IF THIS IS A COURTESY WITHHOLDING ONLY, (business located outside of the Village of Oak Harbor and withholding Village of Oak Harbor income tax for an employee with an Oak Harbor address) PLEASE PROVIDE ADDRESS OF EMPLOYEE TO DETERMINE IF VILLAGE OF OAK HARBOR TAX NEEDS TO BE WITHHELD.**

***Not all Oak Harbor addresses have a tax liability to the Village of Oak Harbor Income Tax.**

Name	Address	City	State	Zip
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Address to which tax forms are to be mailed:
Business Net Profit Tax Return Forms to:

Withholding Report Tax Forms to:

Name _____ Name _____

Address _____ Address _____

City _____ State _____ Zip _____ City _____ State _____ Zip _____

ALL TAX FORMS ARE AVAILABLE AT www.oakharbor.oh.us , CLICK ON INCOME TAX TAB, THEN CLICK ON FORMS.

The information hereby submitted, including any accompanying lists and statements, is true and correct.

Signature: _____

Name: _____ Title: _____
(Please Print or Type)

Company: _____

Address: _____

Telephone Number: _____