

CITY OF TIPP CITY RESIDENT INCOME TAX QUESTIONNAIRE

OFFICE USE ONLY

TAX# _____

UTY# _____

- The City of Tipp City has a mandatory filing requirement for all residents age 18 and older who are domiciled within the corporate limits of Tipp City. The annual return is required even if you had no taxable income (did not work) or there is no tax due on your return.
- If you and your spouse (if applicable) are both either retired or are permanently disabled and have no taxable income and no other persons living in your residence, complete Section A then complete Section D on the back of this questionnaire.
- All information provided on this form is confidential and is used for city income tax purposes only.

Please print clearly

Section A – Contact Information

Name _____ DOB _____ SS# _____ - _____ - _____

Spouse's name _____ DOB _____ SS# _____ - _____ - _____

Tipp City address you're moving into _____ Date moved in _____

Prior address _____ From _____ / _____ / _____ To _____ / _____ / _____
(If prior address was within the Tipp City corporation limits)

Telephone number _____ Spouse's telephone number _____

May we contact you by email? Yes ☐ No ☐ Email address _____

Do you own or rent your place of residence? Own ☐ Rent ☐

If renting, give name and telephone of landlord Name _____ PH# _____

Section B – Income

Employer's name _____ Employment city _____
(Where work is actually performed)

Spouse's employer _____ Employment city _____
(Where work is actually performed)

If self-employed, please complete the following: Business name _____

Street address _____

City, state, zip _____

Do you have employees? Yes ☐ No ☐ FEIN _____

Other types of Tipp City taxable income include but are not limited to: 1099-MISC, business income (Schedule C), rent income (Schedule E), partnership income, farm income (Schedule F) and income from lottery/gambling winnings.

Section C - Other Occupants in Residence (18 & Older)

Give name, date of birth and Social Security number of others 18 years of age or older living with you. (Use additional page if necessary)

Name _____ DOB _____ SS# _____ - _____ - _____

Name _____ DOB _____ SS# _____ - _____ - _____

The information provided on this questionnaire is true, correct and complete to the best of my knowledge.

Signature (self) _____ Date _____

Signature (spouse) _____ Date _____

Section D – Retirees and/or Permanently Disabled

If you and your spouse (if applicable) are **both** either retired or are permanently disabled you may qualify for an exemption from filing the annual Tipp City income tax return. Individuals who qualify must not have any income subject to the local income tax. Examples of some of the more common types of taxable and non-taxable income are listed below. Questions regarding other types of income not listed in either category can be directed towards the Tipp City Tax Department at (937) 667-8426.

If you qualify, please complete the **Certification** below. By doing so, you are certifying that you have no income subject to the Tipp City income tax and that you do not anticipate any Tipp City taxable income in the future.

Should your income status change to where you once again have taxable income, an income tax return would be required reporting such income. If your income status does change, you will need to contact the Tipp City Tax Department.

Examples of Tipp City taxable income include but are not limited to: W-2 wages, 1099-MISC, business income (Schedule C), rent income (Schedule E), partnership income, farm income (Schedule F) and income from lottery/gambling winnings.

Examples of Tipp City non-taxable income include but are not limited to: interest, dividends, pensions, retirement distributions, Social Security and income received for serving as a precinct official during an election.

Certification

I/we certify that I/we have no income taxable by the City of Tipp City, Ohio. I/we further certify I/we do not anticipate taxable income in the future. Should my/our income change to include Tipp City taxable income, I/we will file as required by the Tipp City Income Tax Code. I/we understand the certification will be on file in the tax department and until I/we receive or it can be determined I/we have taxable income, I/we will not be required to file the annual Tipp City income tax return.

Signature 1 _____ Date _____

Retired ☐ Date began _____ Permanently disabled ☐ Date began _____

Signature 2 _____ Date _____
(Spouse's signature – if applicable)

Retired ☐ Date began _____ Permanently disabled ☐ Date began _____

Tipp City Income Tax Department
260 S. Garber Dr.
Tipp City OH 45371

Phone (937) 667-8426
Fax (937) 667-6734
Email incometax@tippcity.net

Office hours are Monday through Thursday 7:00 a.m. to 6:00 p.m.