

VILLAGE OF FAIRFAX  
5903 Hawthorne Avenue  
Fairfax, Ohio 45227

Clerk-Treasurer:  
Barbara Blankemeyer



Fairfax Tax Department  
Telephone No.: 513-527-6506  
Fax No.: 513-561-5748  
[www.fairfaxoh.org](http://www.fairfaxoh.org)

Tax Clerk:  
Ann Willis  
[awillis@fairfaxoh.org](mailto:awillis@fairfaxoh.org)

**"Working Together to Build a Better Community"**

Sent: July 27, 2017

### Business Income Tax Registration

—Please Complete and Return Within Ten (10) Days—

Firm Name: \_\_\_\_\_

DBA: \_\_\_\_\_

Local Street Address of Business: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Phone: \_\_\_\_\_ Business Fax: \_\_\_\_\_

Nature of Business: \_\_\_\_\_

Have you previously had an Income Tax account with the Village of Fairfax, Ohio?

Yes \_\_\_\_\_ No \_\_\_\_\_

If Yes, please indicate the account number (SSN or EIN): \_\_\_\_\_

Date you started business within our city \_\_\_\_/\_\_\_\_/\_\_\_\_

Date you first had employees within our city \_\_\_\_/\_\_\_\_/\_\_\_\_

Approximate monthly payroll amount \$ \_\_\_\_\_

If you are using a payroll service, indicate which one \_\_\_\_\_

If you would like your tax returns mailed to an accounting firm or payroll service, please indicate below.

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

**Account Type:** (Check all types applicable to you or your business)

\_\_\_\_\_ C Corporation or S Corporation (please circle one):

Federal ID No.: \_\_\_\_\_ Fiscal Year End: \_\_\_\_\_

President: \_\_\_\_\_ Vice President: \_\_\_\_\_

Address of Home Office: \_\_\_\_\_

Subsidiary Of: \_\_\_\_\_

\_\_\_\_\_ Partnership: Federal ID No.: \_\_\_\_\_ Fiscal Year End: \_\_\_\_\_

Name: \_\_\_\_\_ SSN: \_\_\_\_\_ Address: \_\_\_\_\_

Name: \_\_\_\_\_ SSN: \_\_\_\_\_ Address: \_\_\_\_\_

Name: \_\_\_\_\_ SSN: \_\_\_\_\_ Address: \_\_\_\_\_

If more than three (3) partners, please attach list.

\_\_\_\_\_ Sole Proprietorship: Federal ID No. or Social Security No.: \_\_\_\_\_

Name of Owner: \_\_\_\_\_

Home Address: \_\_\_\_\_

Phone: \_\_\_\_\_

\_\_\_\_\_ Withholding employment tax only

\_\_\_\_\_ Withholding residence tax only

\_\_\_\_\_ Withholding both employment and residence tax