



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

### **Individual Income Tax Registration**

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

#### **Primary Account**

First Name: \_\_\_\_\_ Middle  
Name: \_\_\_\_\_ Last  
Name: \_\_\_\_\_ Social  
Security #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Birth  
Date: \_\_\_\_\_ Phone  
Number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
Email Address: \_\_\_\_\_

#### **Joint Account**

First Name: \_\_\_\_\_  
Middle Name: \_\_\_\_\_  
Last Name: \_\_\_\_\_  
Social Security #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
Birth Date: \_\_\_\_\_  
Phone Number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
Email Address: \_\_\_\_\_

Date moved into Fairfax: \_\_\_\_\_

Street Address: \_\_\_\_\_ Apt. No. \_\_\_\_\_

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

Do you have rental income anywhere? Yes \_\_\_\_\_ No \_\_\_\_\_ (If  
so please attach a list of all addresses of rental properties.) Are

you or your spouse self-employed? Yes \_\_\_\_\_ No \_\_\_\_\_

Do you own a Partnership or S-Corporation? Yes \_\_\_\_\_ No \_\_\_\_\_

Are you or your spouse retired or disabled? Yes (Me) \_\_\_\_\_ Yes (My spouse) \_\_\_\_\_

Yes (Both) \_\_\_\_\_ No (Neither) \_\_\_\_\_

***I hereby certify that all information and statements herein are true and correct:***

Primary Signature: \_\_\_\_\_

Joint Signature: \_\_\_\_\_