

# CITY OF TOLEDO



## DIVISION OF TAXATION AND TREASURY

To Whom It May Concern:

The City of Toledo has a municipal income tax that is applicable to all contractor work performed in the city. This contractor activity is covered under Section 798.01 of the Toledo Municipal Code which requires tax registration when contractor work is performed. In order to become registered with the City of Toledo Division of Taxation, you must complete the questionnaire on the reverse side of this letter. This questionnaire can be returned by facsimile at telephone number (419) 936-2318. A deposit of \$250 is required at time of registration. This deposit will be applied towards your estimated net profits income tax.

The rate of Toledo municipal income tax is two and one-quarter percent (2-1/4%). As an employer, you are required to withhold municipal income tax from all compensation paid to your employees while working inside the City of Toledo. You must also pay tax on net profits attributable to Toledo projects. Completing this questionnaire will enable us to furnish the proper forms to you to effect compliance with the Toledo Income Tax Ordinance and the Contractor - Tax Registration Ordinance.

If your account number is listed under another name, please call the Division of Taxation at (419) 245-1662. And we will make the necessary changes to our database.

Sincerely,

Tax Auditor  
419-245-1662

Encl

<b>For Office Use Only</b> <b>AC#</b>  <b>Date:</b>
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**City of Toledo**  
**Division of Taxation & Treasury**  
 One Government Center, Suite 2070. Toledo, OH 43604-2280. Office (419) 245-1662. FAX (419) 936-2318

**Toledo Income Tax Questionnaire**  
FAILURE TO FULLY COMPLETE MAY RESULT IN DELAYS IN ESTABLISHING YOUR ACCOUNT

Business Type:

Sole Proprietorship (Schedule C filer)    
  Partnership (Form 1065)    
  Corporation (Form 1120/1120S)    
  Association

Single Member LLC    
  Voluntary Withholder (no Toledo operation)

\_\_\_\_\_ **FEDERAL TAX ID NO.**

\_\_\_\_\_ **SOCIAL SECURITY NO. OF OWNER/ CORPORATE OFFICER**

Business Name \_\_\_\_\_ Owner or Corporate Officer's Name \_\_\_\_\_

Business Address \_\_\_\_\_ Owner's/Corporate Officer's Home Address \_\_\_\_\_

Business City, State, Zip \_\_\_\_\_ Owner's/Corporate Officer's City, State, Zip \_\_\_\_\_

Business Phone \_\_\_\_\_ Owner's Phone No. \_\_\_\_\_ Alternate Phone No./Cell Phone \_\_\_\_\_

Business Fax \_\_\_\_\_ Email Address \_\_\_\_\_

Toledo Business Name \_\_\_\_\_ Partner's Name (Tax Matters Partner) **ATTACH LISTING OF NAMES, ADDRESSES, AND SOCIAL SEC. NO. OF ALL PARTNERS)**

Toledo Address, if different \_\_\_\_\_ Partner's Home Address (Tax Matters Partner) \_\_\_\_\_

Mailing Address (if different) \_\_\_\_\_ Partner's City, State, Zip (Tax Matters Partner) \_\_\_\_\_

Starting Date of Toledo Activities \_\_\_\_\_ Partner's Phone No. (Tax Matters Partner) \_\_\_\_\_

- Are there now or will there be employees subject to Toledo Income Tax? Yes \_\_\_\_\_ No \_\_\_\_\_  
 Will you be filing monthly (withholding > \$200/month)? Yes \_\_\_\_\_ No \_\_\_\_\_ Payroll starting Date \_\_\_\_\_
- Accounting Period: Calendar Year? \_\_\_\_\_ or Identify Fiscal Year Ending \_\_\_\_\_
- Nature of Business \_\_\_\_\_
- Is local address the home office or a branch? \_\_\_\_\_
- If your address is not in Toledo, do you conduct business within Toledo City limits? Yes \_\_\_\_\_ No \_\_\_\_\_
- If you operate more than one place of business, give business name and location(s): \_\_\_\_\_

**IF BUSINESS WAS OUTGROWTH OF ANOTHER, COMPLETE THE FOLLOWING**

- Name of former Owner(s) \_\_\_\_\_
- Business Name \_\_\_\_\_
- Mailing Address \_\_\_\_\_
- Type of Organization: Sole Proprietorship \_\_\_\_\_ Partnership \_\_\_\_\_ Corp. \_\_\_\_\_ Association \_\_\_\_\_
- Nature of Change: Sale \_\_\_\_\_ Discontinuance \_\_\_\_\_ Change in Ownership \_\_\_\_\_ Other \_\_\_\_\_
- Accounting Period: Calendar Year \_\_\_\_\_ Fiscal Year Ending \_\_\_\_\_

Signature \_\_\_\_\_ Title \_\_\_\_\_

Printed Name \_\_\_\_\_ Date \_\_\_\_\_