AMBERLEY VILLAGE TAX OFFICE
7149 Ridge Road
Amberley Village, Ohio 45237
513.531.0130 (Office) 513.531.8154 (Fax)
taxoffice@amberleyvillage.org

BUSINESS INCOME TAX QUESTIONNAIRE

Name of Business: _____ **Federal ID Number:** _____
(This is your account number)

DBA:_____ Social Security Number: _____

Business Activity/Product/Service:_____ **Courtesy Withholding?** ☐ Yes ☐ No

☐ Corporation ☐ Partnership ☐ Sole Proprietorship ☐ Other: _____

Address: _____
Street City State Zip Code

Contact Name:_____ **Email:** _____

Phone: (____)_____ (____)_____ (____)_____
Work Cell Fax

Date Activity Began in Amberley Village:_____ **Fiscal Year End:** ☐ Dec 31 ☐ Other:_____

Payroll/Tax Contact:_____ Phone:_____ Email: _____

Will employees work in Amberley Village? ☐ No ☐ Yes, approximate number: _____

Payroll Service Provider:_____ ☐ No Payroll Service Provider

Contact name:_____ Phone:_____ Email: _____

Employee Leasing Company:_____ ☐ No Leased Employees

Contact name:_____ Phone:_____ Email: _____

Withholding Remittance Method: ☐ Payroll Service ☐ Mail ☐ Ohio Business Gateway
Monthly payment required if total annual remittance exceeds $2,399, otherwise payment is due quarterly.

Corporate Officers or Partners (or attach list):

Name:_____ Title:_____ Phone: (____)_____

Address: _____
Street City State Zip Code

Name:_____ Title:_____ Phone: (____)_____

Address: _____
Street City State Zip Code

Please forward completed form to the Amberley Village Tax Office. Thank you!

Rev: 3/2024