



TAX OFFICE
(513) 271-1606
(513) 271-0822 FAX

Village of Mariemont

6907 WOOSTER PIKE
MARIEMONT, OHIO 45227-4428
www.mariemont.org

CHUCK BARLOW
TAX ADMINISTRATOR
Email: cbarlow@mariemont.org

BUSINESS/WITHHOLDING QUESTIONNAIRE

1) Name/Name of Business: _____ FID #: _____

(LOCAL) Address: _____ Phone: _____

City: _____ State: _____ Zip: _____

(OTHER) Address: _____ Phone: _____

City: _____ State: _____ Zip: _____

2) Date your activity began in the Village of Mariemont: _____

3) Indicate type of Business: Individual Proprietorship Partnership Corporation
 Non-Profit Organization Rental Other S Corporation

Please list names of officers (if applicable): President _____

Treasurer _____

Partners Names and Addresses (if applicable):

4) Number of Employees: _____. Approximate monthly payroll: \$_____

Withholding Remittance Method: Payroll Service Mail Ohio Business Gateway

Monthly payment required if total annual remittance exceeds \$2,399, otherwise payment is due quarterly.

Do you lease employees?: Yes No If Yes, Name of Lease Company: _____

5) Accounting period: Calendar year _____ or Fiscal year _____ to _____

6) I certify the above information to be true and accurate.

Name/Title: _____

Signature: _____ Date: _____