

**Village of Granville
Income Tax Department**

141 East Broadway PO Box 514 Granville, Ohio 43023 (740) 587-2764

MANDATORY REGISTRATION FORM

The Village of Granville has mandatory tax registration. In order to ensure equitable tax collection, all village residents are required to register with the income tax department within 30 days of residency whether subject to the tax or not. This is in accordance with Granville Codified Ordinance Section 181.21. Failure to comply would put you in violation of Granville's Codified Ordinances and therefore subject you to penalty. **You have received this registration form either because you are a new village resident or because information currently on file with our office has changed** (i.e. address change, name change, job change etc.) **This form must be completed and submitted to the income tax office within 30 days of residency or change of information.**

Explanation of Tax: Most communities in the State of Ohio are income tax based, as is Granville. More than 65% of Granville's general fund revenue is received from the income tax. The purpose of this tax is to provide funds for general municipal operations and governmental services, such as police, street, maintenance, administration, capital improvements and community service.

The Village of Granville's income tax rate is one and one-half percent (1.5%). This tax is assessed on all earned income of residents and businesses located or doing business within the village corporation limits. Granville's income tax is levied on all salaries, wages, commissions and other compensation earned by residents, or by nonresidents for work done or services performed in the Village. The income tax is also levied on net profits attributable to Granville from all resident and nonresident businesses, professions, or other entities, derived from sales made, work done, services performed or rendered or other activities conducted within the Village. Resident taxpayers who receive compensation from within another taxing municipality are allowed a credit against the tax imposed by Granville. This credit can not exceed fifty percent (50%) of the amount of tax imposed on these wages by Granville.

Please completely answer the questions:

DATE OF BIRTH: _____
FULL NAME _____ SOCIAL SECURITY # _____
CURRENT ADDRESS _____ PO BOX: _____ CITY, STATE, ZIP: _____
DO YOU RENT OR OWN? _____ LANDLORD'S NAME & ADDRESS: _____
DATE MOVED TO CURRENT ADDRESS: _____ HOME PHONE: _____
DAY PHONE: (____) _____
E-MAIL _____
SPOUSE'S FULL NAME: _____ SOCIAL SECURITY #: _____
DATE OF BIRTH: _____

EMPLOYMENT INFORMATION:

NAME OF YOUR CURRENT EMPLOYER: _____ JOB/WORK LOCATION: _____
DO YOU PAY TAX TO THE CITY YOU WORK IN? YES ___ NO ___ IF YES, WHICH CITY? _____
DOES YOUR EMPLOYER WITHHOLD GRANVILLE TAX FROM YOUR WAGES? YES ___ NO ___
IF YES, DATE GRANVILLE WITHHOLDING BEGAN _____
NAME OF SPOUSE'S CURRENT EMPLOYER: _____ JOB/WORK LOCATION: _____
DOES YOUR SPOUSE PAY TAX TO THE CITY WORKED IN? _____ IF YES, WHICH CITY? _____
DOES YOUR SPOUSE'S EMPLOYER WITHHOLD GRANVILLE TAX FROM HIS/HER WAGES? YES ___ NO ___
IF YES, DATE GRANVILLE WITHHOLDING BEGAN _____
DO YOU OR YOUR SPOUSE HAVE RENTAL INCOME? YES ___ NO ___ IF YES LOCATION: _____
DO YOU OR YOUR SPOUSE HAVE OTHER TAXABLE INCOME? _____ IF YES, WHAT TYPE OF INCOME? _____
ARE YOU OR YOUR SPOUSE SELF-EMPLOYED? YES ___ NO ___ IF YES, DO YOU HAVE EMPLOYEES? _____
NAME AND ADDRESS OF BUSINESS _____

LIST ALL OTHER HOUSEHOLD MEMBERS IN THE HOME (state if employed, retired, students or other and relationship)

NAME _____ SOCIAL SECURITY # _____
EMPLOYER _____ RELATIONSHIP _____
NAME _____ SOCIAL SECURITY # _____
EMPLOYER _____ RELATIONSHIP _____
NAME _____ SOCIAL SECURITY # _____
EMPLOYER _____ RELATIONSHIP _____

I HEREBY CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT:

SIGNATURE

DATE

Please fold top down and in half, staple or tape and return within 30 days.
STAPLE OR TAPE CLOSED HERE

VILLAGE OF GRANVILLE
INCOME TAX DIVISION
141 East Broadway
PO Box 514
Granville, OH 43023-0514

PLACE
STAMP
HERE

VILLAGE OF GRANVILLE
INCOME TAX DEPARTMENT
PO BOX 514
141 East Broadway
Granville, Ohio 43023-0514

VILLAGE OF GRANVILLE
INCOME TAX DIVISION
141 East Broadway
PO Box 514
Granville, Ohio 43023-0514

FIRST CLASS

IMPORTANT DATED MATERIAL