



Department of Taxation

PO Box 182048
Columbus, OH 43218-2048
tax.ohio.gov

Title Transfer Review Program
YOUR IMMEDIATE ACTION IS REQUIRED

NAME
ADDRESS
CITY, ST, ZIP

Month 00, 2016
Contact ID:

RE: Case #:
Purchase Date:
County:
Tax Rate:
Item Description: Snowmobile

The [Ohio Department of Taxation](#) is conducting a review of an [affidavit](#) of ownership we recently received from the [Bureau of Motor Vehicles](#) pertaining to your purchase of a non-titled vehicle.

The Department has evidence that you paid \$xx.xx for the [Snowmobile](#) listed above; however, the [affidavit](#) indicates that no tax was paid. If taxes have already been paid, please submit proof of payment (i.e. cancelled check, receipt, etc.). If the purchase is not subject to Ohio tax, you must provide a valid reason for [exemption](#).

If you paid tax or had a valid [exemption](#) at the time of purchase, please list the tax paid amount or exemption reason on the [affidavit](#) you complete at the Deputy Registrar when purchasing future [stickers](#) for your vehicle.

Please remit \$xx.xx, made payable to "Treasurer - State of Ohio" along with the voucher below, proof of payment or statutory claim for exemption in the envelope provided by Date 00, 2016. Failure to respond to this notice will result in an [assessment](#) being issued including [penalty](#) and [interest](#).

If you have any questions regarding this matter, please contact us.

Compliance Division
Email: Vehicle.Group@tax.state.oh.us
Phone: 1-888-405-4039
Fax: 1-206-984-2940
TTY/TDD: 1-800-750-0750

TTST0003

1 of 1

Ohio Universal Payment Voucher
Bill Payment (03)
Use Tax (608)

Reporting Period:

Account #
Contact ID:
Title #:

NAME
ADDRESS
CITY, ST, ZIP

****STATE USE ONLY****

DO NOT fold or staple...

[Ohio Department of Taxation](#)
PO Box 182048
Columbus, OH 43218-2048

Amount Owed: \$

Enter Amount Paid: \$

