

# Village of Elmwood Place

INCOME TAX BUREAU  
6118 VINE STREET  
ELMWOOD PLACE, OH 45216

Account # \_\_\_\_\_

- rev 5/01

## BUSINESS AND PROFESSIONAL QUESTIONNAIRE

▪ Name of Business Owner(s) \_\_\_\_\_ S.S.# or FID # \_\_\_\_\_

▪ Name of Officer(s) (If a Corporation) \_\_\_\_\_

▪ Trade Name (if any) \_\_\_\_\_

▪ Business Address (Elmwood Place) \_\_\_\_\_ Telephone \_\_\_\_\_

a) Do You Own the Property Where your Business is Located?  Yes  No

b) If No, give Name and Address of Landlord: \_\_\_\_\_

▪ Is Elmwood Place Address a:  Home Office  Branch Office

▪ Mailing Address (if different from above) \_\_\_\_\_

▪ Opening Date of Business (in Elmwood Place) \_\_\_\_\_

### TYPE OF ORGANIZATION:

Individual Proprietor  Partnership  Corporation  Non-Profit  Association

If a Partnership, Association, or other Unincorporated Joint Business Venture, indicate how the Elmwood Place Income Tax Return, based upon the net profit, will be filed and paid:

In Full By the Business  Separately by Individual Members

If a Partnership, give Name and Address of all Partners: \_\_\_\_\_

\_\_\_\_\_

▪ Will you have Employees subject to Elmwood Place Withholding Tax?  Yes  No

▪ Number of Employees at the Elmwood Place Address: \_\_\_\_\_

▪ Business Accounting Period  Calendar Year  Fiscal Year Ending

▪ Nature of Business \_\_\_\_\_

▪ Do you have Net Profits attributable to Elmwood Place?  Yes  No

▪ Do you operate more than one Business in Elmwood Place?  Yes  No

If yes, give Name and Address: \_\_\_\_\_

\_\_\_\_\_

Signature \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_