



CITY of VAN WERT

515 EAST MAIN STREET • VAN WERT, OHIO 45891

"Vincit Amor Patriae"

The Love of Country Conquers

INCOME TAX DEPARTMENT

PHONE: 419-238-6020

FAX: 419-238-4920

FORM A - INDIVIDUAL

The following information will aid us in preparing forms for your use in complying with the Van Wert Income Tax Ordinance. Please answer all questions fully and return the completed form to our office within ten (10) days from receipt. All information is confidential and will only be used for Income Tax purposes.

1. Your name _____ Spouse _____
2. Current Address _____ How long? _____
Former Address _____ How long? _____
3. If you currently rent your home, to whom is rent paid?
Name _____ Address _____
4. What is your employment or occupation?
Yours _____ Spouse _____
5. City and State of employment: Yours _____ Spouse _____
6. Employers name and address:
Yours _____ How long? _____
Spouse _____ How long? _____
7. Previous employer - name and address:
Yours _____ Dates of employment _____
Spouse _____ Dates of employment _____
8. Does employer withhold city income tax? Yes _____ No _____
If yes, indicate city: Yours _____ Spouse _____
If other than Van Wert City tax is withheld by your employer, attach pay stubs or W2's.
9. Do you have rental properties, trust or farm income? Yes _____ No _____
If you have trust income, what is the nature and gross annual income realized from the trust?

If you have rentals or farm income, complete the following:

Address	Gross Annual Income	Date Acquired
_____	_____	_____
_____	_____	_____
_____	_____	_____

(If additional space is needed, attach list)

Do you or your spouse receive Director's fees or any other taxable income that is not listed above? Yes _____ No _____

If yes, indicate the source and approximate annual amount received.

Source	Gross Annual Income
_____	_____
_____	_____

Signature _____ Date _____

Your Soc Sec # _____ Spouse Soc Sec # _____