



CITY OF ASHTABULA

INCOME TAX DEPARTMENT
City Municipal Building
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BUSINESS REGISTRATION APPLICATION

For the purpose of our records, with regard to Ashtabula Income Tax, **PLEASE COMPLETE AND RETURN IN 10 DAYS.** Complete all required information. If you have any questions, please call our office.

Firm Name : _____
Doing Business As (DBA) _____ Fiscal Year End Date: _____
Local Street Address of Business: _____
City: _____ State: _____ ZIP: _____
Mailing Address: _____
Is this the Home Office? Branch Office
Telephone Number: (____) ____ - _____ Contact Person: _____ Business Product/Service: _____
Email: _____

JEDD ACCOUNT? **YES** **NO**

Date Began Doing Business in (*Please check one*): **Ashtabula City** **Ashtabula Township** **Saybrook Township**
Date: _____ and/or Employee Withholding: _____

Federal Id Number: _____ or Social Security Number, if sole proprietorship: _____

Number of Employees: _____ If none, do you expect to have employees in the future? **YES** **NO**

Type of Business (*Please Check one*): **Corporation** **S-Corporation** **Partnership** **Sole Proprietorship**
 LLC (single member) **LLC (multiple members)** **LLP**

Filing Payroll Taxes (*Please check one*): **Monthly** **Quarterly**

Will a payroll company be filing the company's withholding taxes? (*Please check one*):
 Yes, name of the Payroll Company _____ **No**

Does your company lease employees? (*Please check one*):
 Yes, name of leasing company _____ **No**

Does your company use subcontractors? (*Please check one*):
 Yes, attach a list with name, address and phone numbers of subcontractor(s) _____ **No**

If the company is replacing another company previously registered with us (e.g. due to incorporation, mergers, etc...), please indicate the name and FID number of the company: _____

Name and Address of Corporate Officers or Partners (or attach list): _____

Is this a courtesy withholding? **Yes** **NO** If withholding for ONE individual, please provide the name and address below.

SIGNATURE _____ DATE _____

(For Tax Office Only)

CITY FILE NO. _____