

Village of Bradner—Income Tax Department
Bradner, Ohio 43406

Tax Commissioner

Individual Questionnaire

All information requested on this form is essential to the completion of our records and will be held in strict confidence. All residence of Bradner pay a 1% income tax on your annual income.

Please complete and return this form within ten (10) days.

Tenant Information:

1) Name: _____ Name & Address of Employer _____
Social Security #: _____ _____
Street Address: _____ _____
PO Box: _____ _____
Phone Number: _____

Are you employed at the present time? Yes No

If you are not employed, please indicate your employment status...

Temporally Laid Off Retired Other, Explain: _____

Do you have rental income? Yes No Do you have any other income? Yes No

If yes, please explain: _____

Are you subject to income tax in any other city? Yes No If yes, what city? _____

Spouse/Roommate Information:

2) Name: _____ Name & Address of Employer _____
Social Security #: _____ _____
Street Address: _____ _____
PO Box: _____ _____
Phone Number: _____

Are you employed at the present time? Yes No

If you are not employed, please indicate your employment status...

Temporally Laid Off Retired Other, Explain: _____

Do you have rental income? Yes No Do you have any other income? Yes No

If yes, please explain: _____

Are you subject to income tax in any other city? Yes No If yes, what city? _____

Please list any other employed persons at this address and give their relationship to you and their employer.

I certify that the above information is true to the best of my knowledge;

Signature of Bradner Resident Date

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