

Perrysville Income Tax Questionnaire

In accordance with the Village of Perrysville Income Tax Ordinance, it is mandatory that all residents of the Village of Perrysville file a Perrysville Income Tax Return. The information requested on this form is required in order to register with the Income Tax Department and will be held in strict confidence.

1. Name	Social Security No. / /	File <input type="checkbox"/> Joint <input type="checkbox"/> Sep arate
Spouse Name	Spouse Social Security No. / /	
2. Street Address	P.O. Box	Date You Moved To This Address
Previous Address		
Home Phone	Work Phone	
Please Indicate Actual Location Of Employment - Not Necessarily Home Office		
3. Occupation: Self	Spouse	
Employer	Employer	
Address	Address	
List Other Members Of Household 18 Years Of Age Or Older		
Name	Social Security Number / /	
Name	Social Security Number / /	
Name	Social Security Number / /	
<input type="checkbox"/> Yes <input type="checkbox"/> No		
Address of Property Owner		
5. Do you have rental income? (If yes, list location) <input type="checkbox"/> Yes <input type="checkbox"/> No		
Do you have any other income? (List Sources)		
6. Do you pay tax to any city/village other than Perrysville? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, give name		Date
I declare that to the best of my knowledge, the above information is true and correct.		
Signature		Date

Exemption Certificate

I, _____, am exempt from filing a Village of Perrysville	
Income Tax Return for the following reason:	
<input type="checkbox"/> 1. Under 18 years of age. Date of Birth: _____	
<input type="checkbox"/> 2. Senior citizen, no income other than Social Security or pensions.	
<input type="checkbox"/> 3. Other (Explain) _____	
I understand that in the event I am no longer exempt, I am required to notify the Perrysville Income Tax Department.	Signature _____ Date _____