



CITY OF NORTH RIDGEVILLE

**Income Tax Department**

7307 Avon Belden Road, North Ridgeville, OH 44039

PHONE (440) 353-0847 FAX (440) 353-0118

www.nridgeville.org/tax

**BUSINESS AND PROFESSIONAL QUESTIONNAIRE**

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

( Please complete and return questionnaire promptly so further correspondence is not required)

PLEASE PRINT CLEARLY

1. Local name and address as used for business purposes:

Trade Name \_\_\_\_\_

Location/Job site in city \_\_\_\_\_ Date Started \_\_\_\_\_

2. Nature of business conducted \_\_\_\_\_

3. Federal I.D. No. or Social Security No. \_\_\_\_\_

4. Accounting period used for Federal income tax purposes: \_\_\_\_\_ Calendar Year End 12/31  
\_\_\_\_\_ Fiscal Year ending \_\_\_\_\_

5. Do you now employ one or more persons in North Ridgeville? \_\_\_\_\_  
Date employees started in North Ridgeville \_\_\_\_\_

6. Do you expect to have employees in the future? \_\_\_\_\_ When \_\_\_\_\_

7. Do you at any time during the year employ persons who are subject to North Ridgeville  
Income tax and from whom you **do NOT** withhold city income tax? Yes \_\_\_\_\_ No \_\_\_\_\_  
Attach list of such persons including name, address and social security or Federal I.D. No.

8. Type of ownership:  
Individual Proprietorship \_\_\_\_\_ Corporation \_\_\_\_\_ Partnership \_\_\_\_\_ Non-profit Corp. \_\_\_\_\_

9. If partnership association or other unincorporated joint business venture, indicate how the  
North Ridgeville income tax will be filed/paid: By business \_\_\_\_\_ or separately by  
individual members proportionate share \_\_\_\_\_

10. Net profit mailing address:

Name \_\_\_\_\_

Attn: \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

\* Withholding mailing address:

Name \_\_\_\_\_

Attn: \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

(\*Resident courtesy W/H only see #16)

11. A) Owner's name and address:

Individual proprietor

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

B) Corporate subsidiary give name/address  
of parent company

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

C) If partnership, association or other unincorporated joint business venture list names, addresses, social security # or FID# of partners, associates or members in venture.

\*\*Throughout this questionnaire wherever listings are requested ---- attach separate list(s) if sufficient space has not been provided.

Name	Address	City/State	SS# or FID#
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

12. With reference to real estate properties located within North Ridgeville

A) Does the business occupy, as tenant, real property in North Ridgeville rented from others? If so, to whom is rent paid?

Name	Address	City/State
_____	_____	_____
_____	_____	_____

13. Do you operate any other business within or outside of North Ridgeville? \_\_\_\_\_  
(Other businesses include rental properties) If so list those properties located within and outside of the city)

14. If place of business is outside of North Ridgeville do you have earnings resulting from activity in North Ridgeville? \_\_\_\_\_

15. List names and addresses of all sub-contractors.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

16. If withholding North Ridgeville city income tax for a resident as a courtesy please list name, address and social security number \_\_\_\_\_

Supplemental Information

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signature required: This information submitted is true and correct to the best of my knowledge:

Name, if individual \_\_\_\_\_ Company Name \_\_\_\_\_

By \_\_\_\_\_ Title \_\_\_\_\_

Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Telephone No. \_\_\_\_\_ Date \_\_\_\_\_

Email \_\_\_\_\_

(Please print clearly)

QBus