



City of North Ridgeville

INCOME TAX REFUND

7307 Avon Belden Rd.

Telephone 440-353-0846

North Ridgeville, OH 44039

Fax: 440-353-0118

Name _____ Social Security# _____

Address _____ Municipality of Employment _____

City, State & Zip _____ Tax Year of Claim _____

1. Name of Employer _____

2. Amount of income exempt from tax (see reason below) \$ _____

3. Amount of gross refund claimed \$ _____

4. Minus the amount you want credited to your account \$ _____

5. Net Amount to be refunded \$ _____

CHECK BELOW REASON FOR CLAIM:

1. _____ Tax withheld or computed on income earned while under eighteen years old. **Attach W-2, copy of birth certificate or driver's license.**

2. _____ Un-reimbursed business expenses. Attach W-2, Federal Form 2106, Schedule A and any other supporting documentation.

3. _____ Other (State reason and attach documentation) _____

Employer's Certification - To be completed by Employer (see reverse side for instructions)

I/We verify that during _____ I/We withheld City of North Ridgeville income tax from the above named employee in excess of his liability for the year based on the following computations

COMPUTATION OF OVERPAYMENT:

A. Salaries, Wages, etc., Paid \$ _____ on which _____ % tax withheld was: \$ _____
Income earned in _____ \$ _____ Subject to city tax (See back) \$ _____
Less Minimum 25% if 1% (.01) withheld allocated to North Ridgeville \$ _____
Overpayment..... \$ _____

B. Basis for Refund (Employer must provide all pertinent information and facts on which claim is based.) Explain method and show computations used to determine income earned in _____

C. The employee's address according to our records for the period covered by the claim was:

I/We verify that no portion of said tax has been or will be refunded directly to the employee and that no adjustments to my/our withholding account with the City of North Ridgeville have been or will be made for said tax.

Employer: _____
(Signature) (Title) (Date)

I certify that the facts and allegations contained in the above statement are true.

Taxpayer: _____
(Signature) (Area Code / Phone Number) (Date)

INSTRUCTIONS

1. **Copies of W-2 wage and tax statements must be attached** otherwise applications for refund will not be accepted.
2. **If refund claim is filed because all or portion of wages was earned while under 18 years of age, please attach a copy of a birth certificate or driver's license.** (Birth certificates returned upon request, if self addressed stamped envelope is included.)
3. If portion of wages were earned prior to attaining 18 years of age submit breakdown showing amount earned prior to turning 18. Employers certification must be completed only if requested by this office.
4. If refund claim is filed for portion of wages earned in a non-taxing community, employer's certification must be completed in detail with the amount of wages earned in the non-taxing community.
5. Whenever it is necessary to have the claim executed by an agent on behalf of the taxpayer, an authenticated copy of the document authorizing such agent to sign the claim on behalf of the taxpayer must accompany the claim.
6. In all cases list the exact city of employment.

INSTRUCTIONS FOR EMPLOYERS

- A. List total compensation paid and full amount of city tax withheld.
Compute the amount to be entered in "Income earned in the City" by multiplying the total compensation by the ratio of days worked in the City to total days worked. Days worked only refers to the number of days on the job. An employee is on the job when there is a holiday, or when he is sick or on vacation.

EXAMPLE: An employee worked 160 days in the City and 80 days out of the city, for a total of 240 working days. Report as wages earned in the City, 160/240 or 2/3rds of his total wages (which would include vacation pay, holiday pay and sick pay), since all pay has the same relative tax location as the location where the employee performs his services.

NOTE: For employees paid on commission basis, the ratio of commissions earned in the City to total commissions should be used instead of using days worked.

- B. **Basis for Refund:** A brief but complete explanation by the employer is required concerning the reason for the overpayment to be refunded. Explain method and show computations used to determine amount entered in "Income Earned in the City."

- C. Show the employee's address as listed on the employer's records.

The Employer's Certification must be signed by the employee's supervisor or other responsible representative of the employer who has knowledge that this information is true and factual.

NOTE: Separate requests are required if more than one employer or more than one City is involved.