

# VERSAILLES TAX DEPARTMENT

PO Box 288  
Versailles, OH 45380

Phone: 937-526-3294, ext. 204  
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## BUSINESS QUESTIONNAIRE

All employers, Contractors, Sub-Contractors or Individuals who do work in Versailles are required to register with the Tax Administrator before the work begins. In order to properly determine your taxable status under the Versailles Income Tax Ordinance, we are requesting that this questionnaire be completed and returned within 20 days.

1. Name of Individual \_\_\_\_\_  
Owner(s) \_\_\_\_\_
2. Name of Corporation \_\_\_\_\_  
Statuary Agent \_\_\_\_\_ SSN: \_\_\_\_\_  
Federal ID Number \_\_\_\_\_  
Telephone Number: \_\_\_\_\_ Fax Number \_\_\_\_\_
3. Give home address of owner(s) or all partners if a Partnership & include SS#(s)  
\_\_\_\_\_ SS# \_\_\_\_\_  
\_\_\_\_\_ SS# \_\_\_\_\_  
\_\_\_\_\_ SS# \_\_\_\_\_
4. Business Address \_\_\_\_\_
5. Date when business or job will start in Versailles \_\_\_\_\_
6. Address where work will be done in Versailles \_\_\_\_\_
7. Withholding remittance is required: Monthly (\$200 or more) \_\_\_ Quarterly \_\_\_  
No: I am not required to remit withholding \_\_\_\_\_ (See question 16 below)
8. Total number of employees withholding for \_\_\_\_\_
9. Type of Organization: Individual \_\_\_ Partnership \_\_\_ Corporation \_\_\_
10. Accounting Period: Calendar Year \_\_\_ or Fiscal Year Ending (month) \_\_\_
11. Nature of Business \_\_\_\_\_
12. Do you have any Sub-Contractors on the Versailles job? Yes \_\_\_ No \_\_\_ If yes, please attach a list showing name, addresses and phone numbers or write list of Sub-Contractors on back of this sheet.
13. With reference to Real Estate Property and Personal Property within the Village of Versailles, does the Business or Profession occupy, as Tenant? If yes, then to whom is rent paid.

NAME

ADDRESS

**For all Business / Contractor doing business inside Versailles city limits but are located outside Versailles city limits.**

14. Non-Resident Business, estimated completion date of job: (Month & Year) \_\_\_\_\_
15. Non-Resident Business, how many employees (Working More than 20 days) will be working on the project? \_\_\_\_\_
16. Non-Resident Business, are you a Small Business (total revenue of less than \$500,000 during the preceding taxable year)? Yes \_\_\_ No \_\_\_ If yes, please send a copy of your preceding tax year Federal return for verification. You may not need to withhold tax.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

