

For Tax Office Only	
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**VILLAGE OF BOLIVAR**  
**INCOME TAX DEPARTMENT**  
BOX 204  
BOLIVAR, OHIO 44612-0117

For Tax Office Only	
Fiscal Period	
Code	
By	
Ch'k'd	
Plate Filled	

EFFECTIVE DATE OF TAX: July 1, 1986  
AMOUNT OF TAX: One Percent (1%)

For the purpose of our records, with regard to the **Bolivar** Income Tax, please complete and return this questionnaire as soon as possible.

## BUSINESS QUESTIONNAIRE

1. Local name and address as used for business purposes:  
Trade Name \_\_\_\_\_ FIN# \_\_\_\_\_  
Location \_\_\_\_\_
  2. Is above address main office, or branch office? \_\_\_\_\_
  3. If branch, give name and address of main office.  
Name \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ Zone \_\_\_\_\_ State \_\_\_\_\_
  4. Nature of business conducted: \_\_\_\_\_ Date started or acquired: \_\_\_\_\_
  5. Name and address of previous owner \_\_\_\_\_
  6. Accounting period used for Federal Income Tax Purposes:  Calendar Year ending December 31.  
(Check which—if Fiscal Year, write in ending date)  Fiscal Year ending \_\_\_\_\_
  7. Name of accounting firm or individual who prepares your tax returns \_\_\_\_\_
  8. Do you now employ one or more persons? \_\_\_\_\_ Number of Employees \_\_\_\_\_
  9. Do you expect to have employees in the future? \_\_\_\_\_
- Note:** You may have persons in your employ, and subject to the **Bolivar** Income Tax, but from whom you are not required to withhold the Village Tax. For example, complete employer-employee relationships do not exist, as in the case of contract labor, independent commission sales brokers, etc., or your business may be located outside the village limits. The next question covers such cases.
10. Do you at any time during the year employ persons **who are subject to the Bolivar Income Tax** and from whom you do not withhold the Village Tax? \_\_\_\_\_ **Attach list of such persons, showing names and addresses.**
  11. Type of ownership—check which:  
Individual proprietorship \_\_\_\_\_ Corporation \_\_\_\_\_; Partnership \_\_\_\_\_; Non-profit Corporation \_\_\_\_\_; Association \_\_\_\_\_  
Other (write in) \_\_\_\_\_
  12. If partnership, association or other unincorporated joint business venture, indicate HOW the **Bolivar** Income Tax Return, upon the net profit, will be filed and paid. Check which:  
(a) In full by the business \_\_\_\_\_; or (b) Separately by the individual members on proportionate shares \_\_\_\_\_
  13. Address to which tax forms are to be mailed: \_\_\_\_\_
- |  |  |
|--|--|
| <p>Send Business Net Profit Tax Return Forms to:</p> <p>Name _____</p> <p>Care of _____</p> <p>Street Address _____</p> <p>City _____ Zone _____ State _____</p> | <p>Send Withholding Report Tax Forms to:</p> <p>Name _____</p> <p>Care of _____</p> <p>Street Address _____</p> <p>City _____ Zone _____ State _____</p> |
|--|--|

**Note:** If all forms go to same address, complete left side only, and write, "Same" across face of right side.

(COMPLETE QUESTION ON REVERSE SIDE ALSO)

14. Owner's name and address:  
 (a) If individual proprietorship, give owner's name and address:  
 Name .....  
 Street Address .....  
 City ..... Zone ..... State .....

(b) If corporate subsidiary, give name and address of parent company main office:  
 Name .....  
 Street Address .....  
 City ..... Zone ..... State .....

(c) If partnership, association, or other unincorporated joint business venture, list names and addresses of partners, associates, or members in venture:

Name	Address	City	State
(1) .....	.....	.....	.....
(2) .....	.....	.....	.....
(3) .....	.....	.....	.....
(4) .....	.....	.....	.....

Note: Throughout this questionnaire wherever listings are requested—attach separate lists if sufficient spaces have not been provided.

15. Do you also conduct your business, as named in question 1, from OTHER LOCATIONS within or outside the Village of Bolivar? If you do, list addresses of the other locations within Bolivar:

(1) ..... (3) .....  
 (2) ..... (4) .....

16. Do you operate any OTHER BUSINESSES within or outside the Village of Bolivar?

If you do, list those located within the village:

Trade Name	Address	Nature of Business
(1) .....	.....	.....
(2) .....	.....	.....

17. With reference to real estate properties (land and building) located WITHIN THE Village of Bolivar,

(a) Does the business occupy, as tenant, real property in Bolivar rented FROM others? If so, to whom is rent paid? (Gives owner if known, otherwise his agent.)

Name	Address	City	State
(1) .....	.....	.....	.....
(2) .....	.....	.....	.....
(3) .....	.....	.....	.....
(4) .....	.....	.....	.....

18. If place of business is outside Bolivar, do you have earnings resulting from activity in Bolivar?

**SUPPLEMENTAL INFORMATION**

.....  
 .....  
 .....  
 .....  
 .....

The information hereby submitted, including any accompanying lists and statements, is true and correct. — Signature:

Date Signed ..... Name (if individual) .....  
 Your Phone Number ..... Company .....  
 Extension Number ..... By ..... Title .....  
 Questionnaire Prepared by: ..... Address .....  
 ..... City ..... State .....