



# RITA Estimate Worksheet

Name of Municipality \_\_\_\_\_  
How did you hear about RITA? \_\_\_\_\_ Effective Date – Join RITA \_\_\_\_\_

Tax Data for Tax Year: \_\_\_\_\_

Tax Rate \_\_\_\_\_ Tax Credit \_\_\_\_\_ Credit Limit \_\_\_\_\_ Population \_\_\_\_\_

	Total # of Active Accounts	Total Dollars (Net Refunds)
All Account Types (Individual, Net Profit and Withholding)	_____	_____
Individual Accounts	_____	_____
Net Profit Accounts	_____	_____
Withholding Accounts	_____	_____

- Do you participate in a JEDD, JEDZ, or ENTERPRISE ZONE?  YES  NO
- If yes, does it include Withholding and Net Profits?  YES  NO
- Do you capture SSN and FEIN in your tax system?  YES  NO
- Does your local income tax ordinance require semi-monthly withholding?  YES  NO
- Do you have mandatory filing requirements even if there is no tax due?  YES  NO
- Do you utilize the State of Ohio tax lists for non-filer compliance?  YES  NO
- Are delinquent (non-paying) accounts kept in-house or sent to an outside firm?  YES  NO
- How many active payment plans do you have? \_\_\_\_\_
- Do you pursue delinquent (non-paying) accounts through civil action?  YES  NO
- If yes, are civil actions handled in-house or assigned to an outside firm?  IN-HOUSE  OUTSIDE FIRM
- How many civil suits are typically filed each year? \_\_\_\_\_
- What percentage of accounts are delinquent (non-paying)? \_\_\_\_\_
- What percentage of residents work outside the city/village? \_\_\_\_\_
- Are income tax receipts sent to your city/village or to a lockbox?  CITY/VILLAGE  LOCKBOX

Income Tax Department Budget (excluding refunds issued) \_\_\_\_\_

- Are costs associated with civil actions included in your Tax Department budget?  YES  NO
- Do you have a backlog of tax return processing?  YES  NO
- If yes, how many returns are backlogged? \_\_\_\_\_

### Services Municipality Currently Provides:

- E-FILE
- E-PAYMENT
- DOCUMENT IMAGING
- ON-LINE TAX CALCULATION

Tax System and version or Third Party Administrator Name \_\_\_\_\_

Person completing this form:

Name \_\_\_\_\_ Title \_\_\_\_\_ Phone # \_\_\_\_\_ Date \_\_\_\_\_

Additional contact person:

Name \_\_\_\_\_ Title \_\_\_\_\_ Phone # \_\_\_\_\_

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**Please call 866.252.0913 with questions**

Note: this information will be held in strict confidence and used solely for completing an estimate for tax collection services