

Village of Evendale  
10500 Reading Road  
Evendale, Ohio 45241

**INCOME TAX DEPARTMENT**  
**NEW RESIDENT QUESTIONNAIRE**

Phone (513) 563-2671  
Fax (513) 563-4636  
www.evendaleohio.org

Address \_\_\_\_\_ Date Moved into Village \_\_\_\_\_ Acct No. \_\_\_\_\_  
House No. Street (Office use only)

Your Name \_\_\_\_\_ Social Security No. \_\_\_\_\_

Employer \_\_\_\_\_ Employer's Address \_\_\_\_\_

Do you have earnings tax withheld? \_\_\_\_\_ Do you receive a refund from city of employment? \_\_\_\_\_

Do you have Business Income? \_\_\_\_\_ If so, where? \_\_\_\_\_

Spouse's Name \_\_\_\_\_ Social Security No. \_\_\_\_\_

Employer \_\_\_\_\_ Employer's Address \_\_\_\_\_

Does spouse pay earnings tax to a city? \_\_\_\_\_ Does spouse receive a refund from city of employment? \_\_\_\_\_

Does spouse have Business Income? \_\_\_\_\_ If so, where? \_\_\_\_\_

NOTE: Please list below **All Other** household occupants regardless of employment status.

<u>Name</u>	<u>Social Security Number</u>	<u>Age</u>
_____	_____	_____
_____	_____	_____

**If anyone listed above pays City taxes through their employer, you must include a copy of a recent pay stub or W-2 with this form. This information may exempt you from filing a yearly Evendale Income Tax Return.**

Do you own your home? Yes No

If you rent your home, please provide Name and Address of Landlord \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you own rental property? Yes No

If you own rental property, please provide Name and Address of Tenant \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*I hereby certify that to the best of my knowledge the above information is true, correct and complete.*

Signature \_\_\_\_\_ Phone Number\*\* \_\_\_\_\_ Date \_\_\_\_\_

**\*\*Please note: Phone number may be shared with other departments within the Village of Evendale.**