

AMHERST INCOME TAX DEPARTMENT
480 Park Ave
Amherst, OH 44001
Phone (440) 988-4212 Fax (440) 988-3749

NON- RESIDENT BUSINESS REGISTRATION

Pursuant to Amherst City Income Tax Codified Ordinances, Chapter 192 and Ohio Revised Code Chapter 718, each non-resident employer doing business within the city for a period of more than 20 days is required to deduct the tax of 1.5% from the gross wages of their employees beginning on the 21st day. This amount will be remitted on a quarterly or monthly basis to the address above. A net profit tax return at the end of your fiscal year shall be filed with the same entity.

Company Name: _____ **Tax ID:** _____
DBA/Trade Name: _____ **Fiscal Year End** _____
Main Office Address: _____ **Phone:** () _____
_____ **Fax:** () _____
Email Address: _____

Workplace Information

Jobsite Location:

_____ **Number of employees:** ____
_____ **Dates working inside Amherst City Limits:**
____/____/____ to ____/____/____
_____ **Type of employment:** _____

Payroll Withholding Information – Tax Rate 1.5%

Remittance Frequency: Monthly (required if over \$200 per month) Quarterly

Mailing Address for _____ **Payroll Contact Name:** _____
W/H Forms: _____ **Phone:** () _____

OR: Payroll Service (FEIN is used as the Account Number)

Company Name: _____
Address: _____
_____ **Contact Name/Dept:** _____ **Phone:** () _____

Net Profit Tax Information

Mailing Address for _____ **Accounting Period Used:**
Net Profit Forms: _____ Calendar Year FYE, Month ____

Tax Dept Contact Name: _____ **Phone:** () _____