

City of Fairfield



RE: Business and/or Withholding Account for Fairfield, Ohio

Dear Taxpayer(s):

Our office is sending a Business Questionnaire that is required to be filled out by all businesses withholding for and/or doing business in the City of Fairfield. *Please remit it to our office within **ten (10) days** from the receipt of this letter in enclosed envelope.*

Employees working in Fairfield: It is required to withhold taxes on all employee qualifying wages at the rate of 1.5%. Qualifying wages are wages as defined by Internal Revenue Code Section 3121 (a) or generally the Medicare Wage box on the W-2. The remittance of the tax withheld from employees must be filed either on a quarterly or monthly basis. If the tax liability is greater than **\$300.00 in any given month**, the remittance is due monthly **by the fifteenth of the following month**. Otherwise, it must be filed quarterly due one month after the end of each quarter. Failure to withhold local tax for employees will result in interest and penalty assessments on the tax owed and legal action by the City against the employer.

An Annual Reconciliation form that reconciles all the withholding payments made to Fairfield with the withholding on the W-2s is **due by February 28th** of the following year. Copies of all W-2's involved with Fairfield must be attached to the reconciliation. Also, if the Medicare Wage box is not the largest wage figure on the W-2, a written explanation is required.

Doing business in Fairfield. It is required to file an annual Business Return (BR). A 1.5% tax is imposed on all net profits as determined by the company's Federal return filed with the Internal Revenue Service (e.g. Form 1120, 1120S, 1065, Schedule C...). A copy of the Federal Return is due with the Business Return. If the company is a sole proprietorship and the company's owner is a resident of the City of Fairfield, he/she will include Schedule "C" income on a Fairfield Individual Income Tax Return (IR). All other non-Fairfield residents who earn Schedule "C" or "E" income must file a separate Business Return (BR). If the company conducts business both within and outside the City, Schedule Y, "Business Appropriation Formula", determines the company's tax liability percentage for the City. In addition, Fairfield's Ordinance allows annual losses to be carried forward against future profits for up to three (3) years.

All Business Returns must be filed within four (4) months of the fiscal year end. Extension Requests for filing must be submitted in writing to the Fairfield Income Tax Division **on or before the original due date**, and if applicable, a copy of the company's Federal Extension request should also be submitted. If there are any questions, please contact our office at the number listed below or visit our website: www.fairfield-city.org.

Sincerely,

Thomas H. Hedge

Thomas H. Hedge
Income Tax Administrator

Rev 1/04

City of Fairfield



Business Questionnaire

Application for (*Please check one*):

Withholding Account

Net Profit Account **

Both Accounts

**** A Net Profit Account must be applied for if performing business activities and/or generating income within the City of Fairfield.**

Name of Company: _____

Doing Business as (DBA): _____ Fiscal Year End Date: _____

Business and/or Fairfield, Ohio Address: _____

Mailing Address: _____

Telephone Number: (____) ____ - ____ Contact Person: _____ Business Product/Service: _____

Type of Business (*Please check one*): Corporation S-Corporation Partnership Sole Proprietorship
 LLC (single member) LLC (multiple members) LLP

Date Began: Doing Business in Fairfield: _____ and/or Employee Withholding: _____

Federal Id Number: _____ or Social Security Number, if sole proprietorship: _____

Number of Employees Working in Fairfield: _____ Number of Employees Residing in Fairfield: _____

Filing Payroll Taxes (*Please check one*): **Monthly** (Mandatory if over \$300.00 per month) **Quarterly**

Will a payroll company be filing the company's withholding taxes? (*Please check one*):

Yes, name of the Payroll Company: _____ No

Does your company lease employees? (*Please check one*):

Yes, name of leasing company _____ No

If the company is replacing another company previously registered with the City of Fairfield (e.g. due to incorporation, mergers, etc...), please indicate the name and FID number of the company: _____

Name and Address of Corporate Officers or Partners (or attach list): _____

