

# City of Fairfield



## Business and/or Withholding Account for Fairfield, Ohio

**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 **\$200.00 in any given month**, the remittance is due monthly **by the fifteenth of the following month**. Otherwise, it must be filed quarterly due by the fifteenth of the following month after the 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 the last day of February** 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 five (5) years.

All Business Returns must be filed within four (4) months of the fiscal year end. All request for extensions shall be filed no later than the last day for filing the City's tax return. If a federal extension has been requested or granted, please submit the extension with the return. If there are any questions, please contact our office at the number listed below or visit our website: [www.fairfield-city.org](http://www.fairfield-city.org).

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INCOME TAX DIVISION  
701 Wessel Dr, Fairfield, Ohio 45014 513-867-5327 Fax 513-867-5333

# City of Fairfield



## **Business Registration**

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: \_\_\_\_\_

Federal Id Number for withholding account (if different from Net profit) \_\_\_\_\_

Number of Employees Working in Fairfield: \_\_\_\_\_ Number of Employees Residing in Fairfield: \_\_\_\_\_

Filing Payroll Taxes (*Please check one*):  **Monthly** (Mandatory if over \$200.00 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): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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