



City of Tiffin Municipal Income Tax Information Form

City of Tiffin Ordinance requires all residents 18 years of age and older to file an annual City of Tiffin Tax Return regardless of whether any tax is due to Tiffin. The information on this form will be used to establish your record and to ensure that you receive necessary mailings regarding city tax for purposes of filing. (Persons age 17 and under are not subject to Tiffin tax. If minor is filing for refund, please include a copy of your driver's license or birth certificate).

The current rate in Tiffin is 2.0%. However, Tiffin does offer credit for taxes paid or withheld to another city limited to 2.0%. Estimated tax payments will be required for individuals who anticipate a Tiffin tax liability of \$200.00 or more of which is not withheld. Please complete all applicable information and return the form to the tax office by email at taxinfo@tiffinohio.gov or fax to 419-448-5406. If we may assist you regarding your income tax, please do not hesitate to call us at 419-448-5405 or email taxinfo@tiffinohio.gov. All forms and instructions are located on our website at www.tiffinohio.gov.

Please complete the following information and return this form to the tax office .

Please Print

Name: (F) _____ (M) _____ (Last) _____ DOB _____ SSN _____

Name: (F) _____ (M) _____ (Last) _____ DOB _____ SSN _____

Address: _____

Current Telephone Number _____ Email address: _____

Date moved into current Tiffin address _____ Do you Own _____ Rent _____

If you rent – Name and address of Landlord _____

Previous address _____

Do you own any property you rent to others? Y _____ N _____ Address(s) of rental property(s) _____

If retired and sole source of income is non-taxable (as listed below), please check here. _____

Non-taxable income – (Please check type(s) applicable) _____ Social Security _____ Interest _____ Dividends

_____ Worker's Compensation _____ Unemployment _____ Earnings while under 18 _____ Military _____ Pension

College student? Y _____ N _____ If yes, please list your permanent address if it is outside Tiffin. _____

List below all other individuals residing at present Tiffin address:

Name: (F) _____ DOB _____ SSN _____

Name: (F) _____ DOB _____ SSN _____

Name: (F) _____ DOB _____ SSN _____

Your Signature

Spouse's Signature

Date