City of Whitehall, Ohio Income Tax Division 360 S Yearling Road Whitehall, OH 43213-1894 Phone: 614-237-9803 Fax: 614-237-7902

APPLICATION FOR EXTENSION OF TIME TO FILE INCOME TAX RETURN



For Calendar Year Ending December 31, _____ Or fiscal period _____ to ____

PART 1	ACCOUNT INFORMATION						
Primary Name (Business Name)				Primary	Primary Social Security Number or (EIN/FID Number)		
Secondary	's (Spouse's) Nam	e	Secondary		ry's Social Security Number		
Address							
City			State		Zip		
PART 2 EXTENSION INFORMATION							
City	Colun Estimate Taxable	ed Total	Tax Rate	Column 2 Estimated Tax Due	Column 3 Less Amount Paid on Current Estimated and/or any overpayment Credits	Column 4 Net Tax Due Tentative Amount	
Whiteh	all		2.5%				
Make payable to: City of Whitehall Mail to: City of Whitehall Income Tax Division 360 S Yearling Road Whitehall, OH 43213					Payment (with this extension)	\$	
accordance		ns. An exte	ension o		lue date with the Whitehall Inco a city income tax return for the		
	-			city tax return. Any rescribed by the city	tax remaining due after the original tax codes.	ginal due date of the	
PART 3 SIGNATURE							
	taxpayer(s). I declare t en above and that I am				city income tax return for the taxable	year stated is necessary for	
Sign >	Signature				Date		
Here Spouse's Signature					Date		
Title (if officer of the Corporation)					Teleph	one Number	

Confirmation of extensions will be acknowledged only if requested and accompanied by a stamped, self-addressed envelope. Disallowed extensions will be acknowledged by mail with the reasons for the denial.