



CITY OF DUBLIN.

DECLARATION OF EXEMPTION BUSINESS ONLY

This exemption form may not be used by individuals who live in the City of Dublin or those individuals required to file a City of Dublin Individual Income Tax form.

FID# _____

COMPANY NAME: _____

LOCAL DUBLIN ADDRESS: _____

CITY: _____ STATE: _____

PHONE NUMBER: (_____) _____ FAX: (_____) _____

CHECK THE APPROPRIATE LINE

1. No business was conducted in the City of Dublin in any part of the requested tax year. _____

2. The Company is a courtesy withholding account only _____

3. We ceased operations in the City of Dublin on (give date) _____

4. Other _____

Signature

Title

Corporate Address (if different from local address)

Phone number

RETURN EXEMPTION FORM TO:
City of Dublin PO BOX 9062, DUBLIN OH 43017-0962