

INDIVIDUAL QUESTIONNAIRE

Bellevue Tax Department 3000 Seneca Ind Pkwy Bellevue, OH 44811
PHONE: (419)483-2734 FAX: (419)484-5535

TO COMPLY WITH THE BELLEVUE CODIFIED ORDINANCE, CHAPTER 193, NO 60-04,
PLEASE COMPLETE THE QUESTIONNAIRE AND RETURN TO BELLEVUE TAX DEPARTMENT.

PLEASE PRINT OR TYPE

Name _____ Social Security No. ____-____-____

Spouse _____ Social Security No. ____-____-____

Street Address _____

City _____ State _____ Zip _____

Mailing address if different _____

Date moved into Bellevue _____ Phone Number _____

Previously filed tax in Bellevue under other name? _____

Are you UNDER 18 ____ YES ____ NO If under 18, Birthdate ____/____/____

Do You Rent ____ YES ____ NO Landlord's Name _____

Landlord's address _____

LIST CURRENT EMPLOYER FIRST

EMPLOYER	ADDRESS	DATE OF EMPLOYMENT	CITY TAX WITHHELD	
			YES	NO
Your's	_____	_____	____	____
_____	_____	_____	____	____
Spouse's	_____	_____	____	____
_____	_____	_____	____	____
_____	_____	_____	____	____

Income other than wages: _____

If unemployed list source of income: _____

Do you or your spouse own rental property with a gross monthly rental of \$250 or more, in or out of the city of Bellevue ? ____ YES ____ NO

Location _____ Tenant _____

Please list below names of other adults (over 18) living at this address:

USE REVERSE SIDE FOR ADDITIONAL INFORMATION