

VILLAGE OF BRADFORD, OHIO  
INCOME TAX DEPARTMENT  
P. O. Box 128  
Bradford, Ohio 45308

**BUSINESS QUESTIONNAIRE**

This information may be shared with other departments within the Village of Bradford

1. Name of Individual \_\_\_\_\_ or  
Owner(s) \_\_\_\_\_
2. Name of Corporation \_\_\_\_\_
  - a. Statutory Agent \_\_\_\_\_ SSN \_\_\_\_\_
  - b. Federal Identification Number \_\_\_\_\_
  - c. Telephone Number \_\_\_\_\_ Fax Number \_\_\_\_\_
3. Address of Owner(s) or all Partners if a Partnership (include social security number(s))

NAME	ADDRESS	TELEPHONE	SSN
a. _____	_____	_____	_____
b. _____	_____	_____	_____
c. _____	_____	_____	_____
4. Billing Address \_\_\_\_\_
5. Date when business (or job) began or will begin in Bradford \_\_\_\_\_
6. Address where work will be done in Bradford \_\_\_\_\_
7. Withholding remittance is required: Monthly (\$200 or more) \_\_\_\_\_ Quarterly \_\_\_\_\_
  - a. No: I am not required to remit withholding----- (See question 16 below)
8. Total number of employees withholding for \_\_\_\_\_
9. Type of Organization: Individual \_\_\_\_\_ Partnership \_\_\_\_\_ Corporation \_\_\_\_\_ Other \_\_\_\_\_
10. Accounting Period: Calendar Year \_\_\_\_\_ Fiscal Year ending (month) \_\_\_\_\_
11. Nature of Business \_\_\_\_\_
12. Do you have and Sub-Contractors on the Bradford: job? Yes \_\_\_ No \_\_\_. If yes, please attach a list of names, address phone numbers and contacts or you may write the list of sub-contractors on the back of this sheet.
13. With reference to Real Estate Property and Personal Property within the Village of Bradford:
  - a. Does the Business or Profession occupy, as tenant, Real Property rented from others?  
Yes \_\_\_ No \_\_\_ If yes, please provide the name and address:

NAME

ADDRESS

**For all Businesses / Contractors doing business inside Bradford city limits but are located outside Bradford**

14. Non-Resident Business estimated completion date of job: (Month & Year) \_\_\_\_\_
15. Non-Resident Business, how many employees (**WORKING MOR THAN 20 DAYS**) will be working on the project? (Do not include yourself) \_\_\_\_\_
16. Non-Resident Business, are you a Small Business (total revenue of less than \$500,000 during the preceding taxable year)? Yes \_\_\_ No \_\_\_ If yes please **mail a copy** of your preceding tax year Federal Return for verification.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**\*\*Withholding Forms may be found on our website: [www.bradfordoh.com](http://www.bradfordoh.com)**

PLEASE RETURN THIS QUESTIONNAIRE WITHIN TWENTY (20) DAYS TO THE VILLAGE OF BRADFORD