



VILLAGE OF MILLERSBURG

6 North Washington Street
Millersburg, Ohio 44654
FAX (330) 674-9044
www.millersburgohio.com

Kelly Hoffee, Mayor

Nate Troyer, Village Administrator
Bobbie Curry, Village Fiscal Officer, Tax Administrator
Matthew Shaner, Police Chief

Village Offices (330) 674-1886
Income Tax (330) 674-6891
Police Department (330) 674-5931

To Millersburg Village Rental Property Owner

Re: Village of Millersburg Income Tax

Subject: Renters/Tenants

As you are aware, the Village of Millersburg currently imposes a one and one-half percent (1.5%) income tax on all income earned within the Village limits and on all residents of the Village ages 18 and over who are actively working.

According to our records, you are the owner of rental property located in the Village. To be consistent and fair to all taxpayers of the Village, I am asking for your assistance in providing us with names and addresses of any renters you may have. In obtaining this information, we can be assured that all Village residents are filing a return and complying with our Income Tax Ordinance.

Effective January 1, 2016 all landlords and/or property owners who own rental property located within the Village are required by Millersburg Income Tax Ordinance 2015-106, Section 181.21 to provide the Tax Department with tenant information. This information is required every year on or before January 31 **AND** within 30 days of a tenant vacating the property.

A form for your use is on page 2 of this document. Please duplicate as needed. You may also submit the information in your own format if all the required information is included.

If you have any questions, please feel free to contact me.

Sincerely,

Bobbie Curry

Bobbie Curry
Income Tax Administrator

LANDLORD'S TENANT INFORMATION REPORT

Required by Section 181.21 of Millersburg Tax Ordinance

File on or before Jan 31 each year AND within 30 days of tenant vacating premises

**Send to: Village of Millersburg
Income Tax Dept.
6 N. Washington St.
Millersburg OH 44654**

PROPERTY OWNER INFORMATION

Property Owner Name: _____

Property Owner SSN/EIN: _____

Property Owner Address: _____

Property Owner Phone: _____

Property Owner Email: _____

TENANT INFORMATION

Rental Unit Address: _____

Tenant Mailing Address (If Different): _____

Name	Phone Number	Retired?	18 Yrs or Older?	Date - Moved In	Date - Moved Out	Forwarding Address
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes			
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes			
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes			
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes			
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes			
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes			
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes			
		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes			

If you know that any of your tenants are retired, please place a check in the box indicated.