

DPQ1

DEER PARK INCOME TAX

CITY OF DEER PARK • INCOME TAX DEPARTMENT • MUNICIPAL BUILDING
7777 BLUE ASH RD., DEER PARK, OHIO 45236-3106

THIS COPY FOR CITY

DATE / /

CASH CHECK M.O.

RECEIPT NO.

AUDIT

Cashier's Validation

Declaration of Estimated Income for Year
FILE BY APRIL 15

(A) Name and Address: - If incorrect, please make necessary changes.

Empty box for Name and Address information.

Social Security No. Fed. I.D. No:

Please answer the following questions:

- 1. City of residence
2. City of Employment
3. Employer's name
4. Date employment began

(D) The undersigned declares this to be a true, correct and complete Declaration of Estimated Deer Park Income Tax for the period stated.

(Signature) (Date)

SEPARATE HERE AND SEND TOP PART TO CITY

INSTRUCTIONS
FOR COMPLETION OF LINES 1 THRU 4 - PART C
COMPUTATION OF ESTIMATED TAX

- 1. Insert the amount you expect to make in the coming year.
2. Line (a) should reflect the amount of tax withheld by your employer for City of Deer Park up to the maximum percent shown on Line 1. Line (b) should correspond to the figure shown on your Final as an overpayment unless a refund was requested. Line (c) refers only to income taxes you expect to pay another municipality.
4. You may pay the entire amount declared with the filing of this form.
NOTE: The return of this form, unless signed, dated and accompanied by payment of at least 25% of the estimated tax shown on Line 3, does not constitute the filing of a Declaration.

(C) Computation of Estimated Tax:

- 1. Total Income Subject to Tax \$
Multiply by Tax Rate of 1.5% for gross tax of \$
2. Less Expected Tax credits
(a) Deer Park Taxes withheld (not to exceed 1.5%) \$
(b) Overpayment from prior year \$
(c) Payments to another municipality (not to exceed 1.5%) \$
(d) Total Credits \$
3. Net Tax Due (Line 1 less Line 2d) \$
4. Amount Paid with this Declaration (not less than 22% of Line 3) \$

MAKE CHECKS TO "CITY OF DEER PARK"
AND MAIL TO: MUNICIPAL BUILDING 7777 BLUE ASH RD.
DEER PARK, OHIO 45236-3106

REMITTANCE STUB
Declaration of Estimated Tax

DPQ 1

Name or Address-If Incorrect, Make Necessary Changes

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45% of unpaid balance must be paid by: JUNE 15

Payment Amount \$

67.5% of unpaid balance must be paid by: SEPT. 15

Payment Amount \$

90% of unpaid balance must be paid by: JAN. 15

Payment Amount \$