



# City of Pickerington

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## INDIVIDUAL QUESTIONNAIRE (MANDATORY REGISTRATION)

The information requested on this form is essential to maintaining accurate records in the tax office and will be held in strict confidence. Thank you for your prompt cooperation.

Please print name, including spouse, as official account should appear.

NAME: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

SPOUSE: \_\_\_\_\_

PRESENT ADDRESS: \_\_\_\_\_ SINCE: \_\_\_\_\_

PREVIOUS ADDRESS: \_\_\_\_\_

YOUR SS# \_\_\_\_\_ SPOUSE SS# \_\_\_\_\_

YOUR EMPLOYER: \_\_\_\_\_ OCCUPATION: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

SPOUSE'S EMPLOYER: \_\_\_\_\_ OCCUPATION: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

If retired, indicate date of retirement: \_\_\_\_\_ Is retirement only source of income? \_\_\_\_\_

Do you have rental income? \_\_\_\_\_ If so, give location: \_\_\_\_\_

Do you have other income? \_\_\_\_\_ If so, give source: \_\_\_\_\_

Are you renting your home \_\_\_\_\_ or buying? \_\_\_\_\_ (Please check one)

If renting, give name and address of landlord: If buying, give name of realtor and realty company:

Do you pay city income tax to your city of employment? \_\_\_\_\_

List any other person and their SS# living at your address who is 18 years of age or older: