

# Declaration of Estimated 2008 BOWLING GREEN Income Tax

To be filed with Commissioner of Taxation, P.O. Box 189, Bowling Green, OH 43402 on or before April 15, or within 3 1/2 months after the close of a fiscal year. Questions? Call (419) 354-6288 or visit our website at [www.bgohio.org](http://www.bgohio.org).

FOR CALENDAR YEAR FILERS:

**DUE DATE IS APRIL 15TH**

ESTIMATED PAYMENTS ARE REQUIRED IF LINE 6, BELOW, EXCEEDS \$100.

For Calendar Year or \_\_\_\_\_ months ending \_\_\_\_\_

Corporate or Trade Name, name of responsible official, proprietor, or individual and address as they appear on our records. Make any necessary corrections.

NAME: \_\_\_\_\_  
 C/O: \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_  
 CITY: \_\_\_\_\_

SOCIAL SECURITY NUMBERS  
 Yours \_\_\_\_\_  
 Spouse \_\_\_\_\_

**INTEREST & PENALTY**  
 Understatement of estimated tax or payment of the tax installment later than the middle of the 4<sup>th</sup>, end of the 7<sup>th</sup>, 10<sup>th</sup>, and 13<sup>th</sup> months causes the taxpayer to be liable for a penalty of 50¢ per business day (minimum \$10) plus 1 1/2% interest per month or portion thereof.

Code Sec. 95.07 and 95.10

A. City of Residence \_\_\_\_\_ Your Employer \_\_\_\_\_  
NAME WORK CITY

Nature of Business \_\_\_\_\_ Spouse's Employer \_\_\_\_\_  
NAME WORK CITY

B. 1. Total Estimated Income subject to Bowling Green Income Tax.....\$ \_\_\_\_\_  
 2. Bowling Green Income Tax, 1.92% of amount shown on Line 1..... \$ \_\_\_\_\_  
 3. a. Tax to be withheld and remitted to Bowling Green.....\$ \_\_\_\_\_  
 b. Tax to be withheld for another city(s) \_\_\_\_\_  
**TAX CREDITS** (not to exceed 50% times the lower rate).....\$ \_\_\_\_\_  
 4. a. Tax (not withheld) properly paid to another city (50% times the lower rate)..... \$ \_\_\_\_\_  
 5. TOTAL CREDITS (total lines 3a, 3b, 4a)..... \$ \_\_\_\_\_  
 6. NET ESTIMATED TAX DUE (Line 2 less Line 5)..... \$ \_\_\_\_\_  
 7. Taxes Due with Estimate (Ordinarily 1/4 of Line 6) ..... \$ \_\_\_\_\_  
 8. Less last year's over payment or previous estimated payments..... \$ \_\_\_\_\_  
 9. Taxes Due on this Estimate (Line 7 less Line 8) ..... \$ \_\_\_\_\_  
 10. Add late fees: a. Interest (1 1/2% per month or portion thereof)..... \$ \_\_\_\_\_  
                   b. Penalty (50¢ per late business day, minimum \$10.00)..... \$ \_\_\_\_\_  
 11. Taxes and late fees. Payment to the City of Bowling Green must accompany this form..... \$ \_\_\_\_\_

C. I/WE declare that this declaration has been examined by me / us and to the best of my / our knowledge and belief is a true, correct and complete declaration of estimated income and / or net profits subject to Bowling Green income tax for the period above stated.

\_\_\_\_\_  
(Signature of Taxpayer's wife or husband if this is a joint declaration) (Date) (Signature of Taxpayer, Partner, Officer or Agent) (Date)