

## Part 1

## ACCOUNT INFORMATION

Name	Primary Social Security Number	CITY OR CITIES OF INCOME 1. _____ 2. _____ 3. _____
Address	Spouse's Social Security Number (if joint)	
City	Filing Status - check only one <input type="checkbox"/> Single <input type="checkbox"/> Married-Filing Joint <input type="checkbox"/> Married-Filing Separately	
State	Zip Code	CITY OF RESIDENCE 1. _____

## Part 2

## EXTENSION INFORMATION

CITY		Column 1 ESTIMATED TOTAL TAXABLE INCOME	TAX RATE	Column 2 ESTIMATED TAX DUE	Column 3 LESS AMOUNT PAID ON CURRENT ESTIMATE AND/OR ANY OVERPAYMENT CREDITS	Column 4 NET TAX DUE TENTATIVE AMOUNT
COLUMBUS	01		2.5%			
GROVEPORT	09		2.0%			
OBETZ	10		2.5%			
CANAL WINCHESTER	11		2.0%			
MARBLE CLIFF	13		2.0%			
BRICE	14		2.0%			
HARRISBURG	16		1.0%			
ALT. CITY	88					

Make payable to: **COLUMBUS CITY TREASURER**  
 Mail to: Columbus Income Tax Division  
 PO Box 182437  
 Columbus, Ohio 43218-2437

**Payment**  
 (with this extension)

\$

Payment can only be accepted  
 for the cities listed above.

If an extension of time is necessary, file this form **on or before the due date** with the Columbus Income Tax Division in accordance with the instructions on the reverse side. An extension of 180 days for filing a city income tax return for the year stated above is hereby requested for the following reason: \_\_\_\_\_

This form only serves to extend the time to file a city tax return. Any tax remaining due after the original due date of the return will be subject to penalty and interest as prescribed in the city tax codes.

## Part 3

## SIGNATURE

**Signature of taxpayer(s).** I declare that the extension requested herein for filing a city income tax return for the taxable year stated is necessary for the reason given above and that I am authorized to sign this request.

**Sign  
Here**

Signature

Date

Telephone Number

Spouse's Signature

Date

This form may be electronically filed and paid at [www.columbus-tax.net](http://www.columbus-tax.net)