

Part 1 ACCOUNT INFORMATION

Name(s) and Current Address	Your social security number	CITY OR CITIES OF INCOME 1. _____ 2. _____ 3. _____
	Spouse's social security number (if joint)	
	Filing Status - check only one <input type="checkbox"/> Single <input type="checkbox"/> Married-Filing Joint <input type="checkbox"/> Married-Filing Separate	
		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		2.0%			
CANAL WINCHESTER	11		2.0%			
MARBLE CLIFF	13		2.0%			
BRICE	14		2.0%			
HARRISBURG	16		1.0%			
*ALTERNATE TAX						

*Alternate city tax (see instructions)

Make payable to: COLUMBUS CITY TREASURER Mail to: Columbus Income Tax Division 50 W. Gay Street, 4th Floor Columbus, Ohio 43215-9037	Payment (with this extension)	\$ _____
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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 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.columbustax.net