

SOUTH BLOOMFIELD INCOME TAX DEPARTMENT
5023 S. UNION STREET
SOUTH BLOOMFIELD, OHIO 43103-1035

(740)983-2541 FAX: (740)983-2541

Website: southbloomfieldohio.com

Email: sbloom@rrohio.com

This form must cover one calendar year and one employer only.

1. Name of applicant _____

2. Present address _____

3. Social Security Number _____ Acct. # _____

THE UNDERSIGNED HEREBY MAKES CLAIM FOR REFUND OF VILLAGE INCOME TAX.

4. In the amount of \$ _____ While employed by _____

5. For tax year _____ Resident address for this period _____

6. Reason applying for refund: _____

Taxpayers signature _____ Date _____

FOR OFFICE ONLY

Clerk-Treasurer: _____

Please refund \$ _____ to _____

Approved by _____ Date _____

Please fill out No. 1 through 6 and sign and return to our office for a refund.