VANDALIA • BROOKVILLE • BUTLER TOWNSHIP JEDZ OFFICIAL INCOME TAX RENTAL INFORMATION QUESTIONNAIRE

City of Vandalia Income Tax Office P.O. Box 727 Vandalia, Ohio 45377-0727

PLEASE COMPLETE AND RETURN THIS FORM WITHIN FIFTEEN (15) DAYS - DO NOT DISREGARD					
The information requested on this form is essential for the completion of our records and will be kept confidential.					
(PLEASE PRINT OR TYPE)					
1.	Name:			Social Security No.:	
	Spouse's Name:			Social Security No.:	
	Street Address:			Telephone No.:	
	City:		State:	Zip:	
2.	Do you receive rental income: Yes □ No □				
	If yes, give address of each rental property, date acquired, and list of all tenants.				
	Address	Date Acquired		Name(s) of Tenants	
The statements made on this questionnaire are true, correct, and complete to the best of my knowledge.					
Signature (Self):			Date:		
Signature (Spouse):			Date:		

IF YOU HAVE ANY QUESTIONS OR NEED ASSISTANCE IN COMPLETING THIS FORM PLEASE CONTACT THE VANDALIA TAX OFFICE AT (937)415-2240.