



www.blueash.com

Income Tax Division

4343 Cooper Road
Blue Ash, Ohio 45242-5699



(513) 745-8516
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blueashtax@blueash.com

Dear Blue Ash Resident:

In order to establish or update your account, we need some basic information. Prompt completion of the attached form could prevent delays in receipt of the great amenities provided by the City including recreation membership.

Helpful tips for completing the registration:

- Please be thorough and fill in all information requested. Use “n/a” for any information that does not apply.
- **List all people living at this address.** This includes children, relatives, roommates, etc. If anyone listed is not employed please note in the employer field (retired, child, on disability, temporarily unemployed, etc.). Note: all individuals 18 and older need to establish their own account and will need to complete a separate registration.

Other useful information:

- The City of Blue Ash has an income tax of 1.25%.
- The City offers credit for taxes paid to other cities up to 1.25% of the related income.
- Annual returns are required to be filed by every resident who is 18 years and older. Those under 18 are only required to file if there is a liability.

The Blue Ash Tax Division would be pleased to assist you with any questions. We are available Monday through Friday, 8:00 AM to 5:00 PM. Additionally, information and forms can be found at www.blueash.com/departments/tax_office.

Please return the completed registration within thirty (30) days. A return envelope has been included for your convenience. Please note that your information will remain confidential as required by Ohio law.

Thank you in advance for your cooperation.

Sincerely,

Blue Ash Income Tax Division

CITY OF BLUE ASH CONFIDENTIAL RESIDENT REGISTRATION

ADDRESS _____ PHONE NO. _____ ACCT. NO. _____
House No. Street Apt. # Zip Code (Office Use Only)

YOUR NAME _____ SOCIAL SECURITY NO. _____ MOVE-IN DATE _____

EMPLOYER _____ ADDRESS WHERE YOU WORK _____

Do you pay earnings tax to a city? _____ If so, what city? _____ Date present employment began _____

Do you or does anyone in your household receive a refund from your city of employment? _____ If so, who? _____

Do you or your spouse have business income? _____ In Blue Ash? _____ Where? _____

SPOUSE'S NAME _____ SOCIAL SECURITY NO. _____ MOVE-IN DATE _____

EMPLOYER _____ ADDRESS OF EMPLOYMENT _____

Does spouse pay earnings tax to a city? _____ If so, what city? _____ Date present employment began _____

NOTE: LIST BELOW ALL OTHER OCCUPANTS (children, relatives, roommates, etc.). USE ADDITIONAL PAPER IF NECESSARY.

| Name | Relationship | Date of Birth | Employer (if appl) | Address of Employment | Date Began | City Taxes? Where? |
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Note: Individuals 18 or over will need to establish their own account and complete a separate registration.

Info/forms can be found at: www.blueash.com/departments/tax_office

If you rent, provide name and address of landlord _____

If any member of your household owns rental property, provide name of owner _____

Address of rental property _____ Date acquired for rental _____

Name of current tenant (if property located in Blue Ash) _____

I hereby certify that to the best of my knowledge the above information is true, correct, and complete.

SIGNATURE _____ Date _____ Email _____

Please return completed form to: Blue Ash Tax Division, 4343 Cooper Road, Blue Ash, OH 45242-5699 or fax to (513) 745-8651.

If any of the above information changes, you are required to notify us within thirty (30) days.

Thanks for your cooperation