

City of Blue Ash

4343 Cooper Road
Blue Ash, Ohio 45242-5699
www.blueash.com

Income Tax Office

(513) 745-8516
Fax: (513) 745-8651
blueashtax@blueash.com

EXTENSION REQUEST FORM

Type or print taxpayer(s) FID number or Blue Ash Tax Account Number, name, address and how payment should be applied below. Please be sure to include 2 copies and a self-addressed stamped envelope to ensure return of your request.

DATE OF REQUEST: _____

FOR TAX YEAR: _____

EXTENSION REQUESTED TO (DATE): _____

PAYMENT AMOUNT ENCLOSED: _____

F.I.D.# or BLUE ASH TAX ACCT. NUMBER	TAXPAYER NAME	ADDRESS	PAYMENT DUE ON EXTENDED TAX YEAR	DECLARATION FOR NEXT TAX YEAR	PAYMENT DUE ON NEXT TAX YEAR

FOR TAX OFFICE USE ONLY

EXTENSION REQUEST GRANTED TO: _____

NO SUCH ACCOUNT NAME OR NUMBER ESTABLISHED

EXTENSION REQUEST GRANTED BY: _____

OTHER _____

TAX PREPARER'S INFORMATION (please print):

Preparer's Name: _____

Preparer's Phone #: _____

Preparer's Address: _____

Preparer's Fax #: _____

Preparer's City, State, Zip Code: _____