



WITHHOLDING AND BUSINESS REGISTRATION

CCA – MUNICIPAL INCOME TAX

205 W Saint Clair Ave
Cleveland OH 44113-1503

Phone: 216-664-2070, 1-800-223-6317 Fax: 216-420-8316
www.ccatax.ci.cleveland.oh.us

DATE BUSINESS STARTED IN CCA PHONE NO.

FEDERAL IDENTIFICATION NUMBER

NAME OR CORPORATE NAME

BUSINESS OR TRADE NAME

BUSINESS ADDRESS IN TAXING COMMUNITY

MAILING ADDRESS

ADDRESS OF OUTSIDE ACCOUNTANT SHOULD NOT BE USED

CHECK BUSINESS TYPE

SOLE PROPRIETOR** CORPORATION
PARTNERSHIP LIMITED LIABILITY CO
S-CORPORATION NON-PROFIT CORP
ESTATE OR TRUST GOVERNMENTAL
FINANCIAL ORG. UNION
OTHER (Detail)

**IF SOLE PROPRIETOR YOU MUST ALSO COMPLETE INDIVIDUAL REGISTRATION FORM

It is your responsibility to advise this office of any changes in your status

Will you be withholding employment taxes? Yes No

For what CCA city(s)

More than \$100 per month? Yes No

Number of employees in CCA? First payroll date in CCA

Will you be withholding residence taxes? Yes No

Type of business (Mfg., Commercial, etc.)

Fiscal Period ending month

Name of person responsible for filing forms:

Name Title Phone No.

Signature Date