

# BUSINESS QUESTIONNAIRE

Village of New London • Income Tax Department  
115 East Main Street • New London, Ohio 44851  
Phone: (419) 929-4461 • Fax: (419) 929-0738

## PLEASE PRINT OR TYPE

Trade Name \_\_\_\_\_

Street Name \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

FED ID# \_\_\_\_\_ SOC SEC # (Sole Proprietor) \_\_\_\_\_

If sole proprietor, list proprietor's information; If Corporation, list corporate information. If above business is branch, list main office:

Name \_\_\_\_\_

Street Name \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Nature of Business \_\_\_\_\_ Date started or acquired \_\_\_\_\_

Type: PROPRIETORSHIP (  ); PARTNERSHIP (  ); CORPORATION: "C" (  ), "S" (  ) or  
NON-PROFIT (  ); ASSOCIATION (  )

List Names and address of all partners, shareholders, or members:

Name	Address	City	State	Zip
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

ACCOUNTING PERIOD: Calendar year (  ) Fiscal year (  ) Ending Date \_\_\_\_\_

NAME of accountant or accounting firm who prepares your tax return:  
\_\_\_\_\_

Are there now or will there be employees working in New London? YES(  ) NO(  )

NUMBER OF EMPLOYEES \_\_\_\_\_

IF ANSWER IS YES, YOU ARE REQUIRED TO WITHHOLD **1.5%** OF THE GROSS WAGES FOR NEW LONDON INCOME TAX.

**SEND WITHHOLDING & BUSINESS NET PROFIT/LOSS FORM(S) TO:**

VILLAGE OF NEW LONDON  
INCOME TAX DEPARTMENT  
115 EAST MAIN STREET  
NEW LONDON OH 44851

Does this business pay rent for the property it occupies in New London? YES( ) NO( )

List the owner of the property, if known, otherwise his agent:

NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_

If business is physically outside New London Village, what activity is being performed within New London that is resulting in potential taxable income or withholding?

Will there be any other payments made for services performed inside the New London Village limits? YES( ) NO( ); If YES, circle type: Commissions, Bonuses, Director fees, Contract labor, Subcontractors, Other (specify):

Do you issue Form 1099 for non-employee services? YES ( ) NO ( )

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**THIS SECTION TO BE COMPLETED BY CONTRACTORS AND SUBCONTRACTORS ONLY**

Name and address of party from who contracted or subcontracted:

\_\_\_\_\_

Location of job \_\_\_\_\_

Probable length of job: From \_\_\_\_\_ To \_\_\_\_\_

Are you or will you be subcontracting any of the work to someone else? YES ( ) NO ( )  
If YES, complete the following:

Contract to:  
Fed ID/SS#: \_\_\_\_\_ Type of Work \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Contract to:  
Fed ID/SS#: \_\_\_\_\_ Type of Work \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Contract to:  
Fed ID/SS#: \_\_\_\_\_ Type of Work \_\_\_\_\_

Name: \_\_\_\_\_ Address: \_\_\_\_\_

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Are you or will you be doing more than one job in New London? YES ( ) NO ( )

The information hereby submitted, including any accompanying lists and statements, is true and correct.

Signature and Title \_\_\_\_\_ Date \_\_\_\_\_

Phone Number: \_\_\_\_\_

Company Name: \_\_\_\_\_