

**Village of Granville**  
**Income Tax Bureau**  
 141 East Broadway \* PO Box 514  
 Granville, Ohio 43023-0514  
 (740) 587-2764

**INCOME TAX REGISTRATION  
 AND SUB-CONTRACTOR DISCLOSURE**

The Village of Granville imposes an income tax at the rate of one and one-half percent (1.5%) on all earned income, including net profits attributable to Granville. All gross wages paid to employees for services or work performed in the Village are also taxed at 1.5%. All employers, contractors, sub-contractors, or others who have one or more employees are required to withhold 1.5% of all employees' gross wages and submit this amount to the Village of Granville.

All employers, contractors, sub-contractors or others who do work or perform services in Granville Village must register with the Income Tax Office and present a list of all sub-contractors, contractors or others who may do work for them and do not have their Income tax liability withheld. This form must be completed and submitted within **FIFTEEN DAYS (15)** of receipt. Failure to do so is a violation of Granville Codified Ordinance 171.22

1. Name and Address of Property Owner: \_\_\_\_\_
2. Location of Project: \_\_\_\_\_
3. Name and Address of Primary Contractor: \_\_\_\_\_
4. Date Service Began in Village: \_\_\_\_\_ Completion Date: \_\_\_\_\_
5. Taxpayer Identification Number: \_\_\_\_\_ (Federal ID or Social Security #)
6. Accounting Period Used For Federal Income Tax Purposes: [ ] Calendar Year [ ] Fiscal Year Ending \_\_\_\_\_
7. Number of Employees Working At This Site: \_\_\_\_\_
8. Subcontractor Disclosure: (YOU **MUST** INCLUDE SUBCONTRACTOR'S FULL MAILING ADDRESS!)

<u><b>TYPE</b></u>	<u><b>SUB NAME AND ADDRESS</b></u>	<u><b>EST PMT</b></u>	<u><b>TYPE</b></u>	<u><b>SUB NAME AND ADDRESS</b></u>	<u><b>EST PMT</b></u>
Excavation	_____	_____	Insulation	_____	_____
Foundation	_____	_____	Roofing	_____	_____
Masonry	_____	_____	Drywall	_____	_____
Structural Carpentry	_____	_____	Finishing Carpentry	_____	_____
Electrical	_____	_____	Siding	_____	_____
Plumbing	_____	_____	Landscaping	_____	_____
HVAC	_____	_____	Painting	_____	_____

List All Other Subcontractors and Other Information On The Back Side Of This Form.

We Certify That The Above Information Is True And Correct, To The Best Of Our Knowledge.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date