

CITY OF GREENVILLE, OHIO  
INCOME TAX DEPARTMENT  
Municipal Building  
100 Public Square  
Greenville OH 45331-1499  
Phone: 937-548-5747 Fax: 937-548-3035

WITHHOLDING QUESTIONNAIRE  
(FORM WWQ)

1. NAME OF COMPANY \_\_\_\_\_
2. BUSINESS ADDRESS \_\_\_\_\_
3. MAILING ADDRESS \_\_\_\_\_  
(if different from line 2)
4. FEDERAL IDENTIFICATION NUMBER \_\_\_\_\_
5. TELEPHONE NUMBER \_\_\_\_\_ FAX NUMBER \_\_\_\_\_
6. EFFECTIVE DATE OF WITHHOLDING \_\_\_\_\_
7. NUMBER OF EMPLOYEES FOR WHICH TAX WILL BE DEDUCTED \_\_\_\_\_
8. WILL YOU REMIT WITHHOLDING: MONTHLY \_\_\_\_\_ QUARTERLY \_\_\_\_\_
9. NAME OF PAYROLL SERVICE IF ANY \_\_\_\_\_
10. STATUTORY AGENT \_\_\_\_\_ SSN \_\_\_\_\_
11. SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

YOUR SIGNATURE CERTIFIES THAT THE ABOVE-NAMED COMPANY IS NOT DOING ANY WORK IN GREENVILLE, BUT IS WITHHOLDING ON EMPLOYEES WHO ARE GREENVILLE RESIDENTS.