

CONFIDENTIAL QUESTIONNAIRE

Village of New Boston
Income Tax Bureau

3980 Rhodes Avenue
New Boston, OH 45662-4999

Address: _____ Apt. No. _____ Phone No. _____ Date Moved In: _____

Own _____ Rent _____ Landlord Name & Address _____

Your Previous Address: _____ How Long Lived There: _____

BUSINESS NAME: _____ LOCATION: _____ OWNER: _____

Mailing Address: _____ (If different from above) No. of Employees: _____ (Business Only)

LIST ALL INDIVIDUALS AT THIS ADDRESS:

ADVISE STATUS FROM CATEGORIES LISTED BELOW:

Name:	Social Security No.	Age	Date of Birth	M/F	EMPLOYED/WHERE UNEMPLOYED/WHY	SELF-EMPLOYED/HOW RETIRED/HOW	MILITARY STUDENT/GRADE

DO YOU HAVE INCOME FROM RENTAL PROPERTY? _____ NO _____ IF YES, LIST ADDRESSES & NAMES OF RENTERS:

(If more space is needed, use reverse side of this form)

PLEASE ANSWER ALL QUESTIONS ACCURATELY AND IN FULL. RETURN IN THE ENCLOSED ENVELOPE WITHIN 15 DAYS. THIS WILL DETER A PERSONAL SURVEY.

DATE: _____ SIGNATURE: _____