



CITY OF PICKERINGTON, OHIO
100 Lockville Road
Pickerington, Ohio 43147
Phone: (614) 837-4116
Fax: (614) 833-2201
Email: tax@pickerington.net
www.ci.pickerington.oh.us

INDIVIDUAL DECLARATION OF EXEMPTION

TAX YEAR:

MUST COMPLETE A SEPARATE FORM FOR EACH YEAR

The City of Pickerington requires mandatory filing of city tax returns. If you meet one of the following exemptions, the filing of this Declaration of Exemption will serve to meet the filing requirement for the current year. Based upon your exemption status, you may be required to file a City income tax return, or contact the Income Tax Office, for future years.

TAXPAYER SOCIAL SECURITY NUMBER

SPOUSE SOCIAL SECURITY NUMBER

TAXPAYER LAST NAME

FIRST NAME

INITIAL

SPOUSE LAST NAME

FIRST NAME

INITIAL

CURRENT STREET ADDRESS

APT #

CITY

STATE

ZIP

1. ☐ I was **UNDER 18** years of age for the entire year.
(ATTACH copy of Birth Certificate or Driver's License) DATE OF BIRTH:

MO	DAY	YR
----	-----	----
2. ☐ I am **RETIRED** and only receive pension income or other non-taxable income DATE RETIRED:

MO	DAY	YR
----	-----	----

(ATTACH Federal 1040 (page 1 and 2), 1099-R, and Social Security award letter)
3. ☐ I was a **NON-RESIDENT** for the entire tax year listed above.
(ATTACH another city tax return, driver's license, and lease) DATE OF MOVE: (IN ☐ or OUT ☐)

MO	DAY	YR
----	-----	----
4. ☐ Taxpayer is **DECEASED** DATE OF DEATH:

MO	DAY	YR
----	-----	----

(ATTACH copy of Death Certificate)
5. ☐ I was **UNEMPLOYED** for the entire year with no taxable income. MUST BE SUBMITTED BY FILING DEADLINE OR \$25 LATE FEE WILL APPLY.
(ATTACH IRS transcript or Federal 1040 (page 1 and 2))
6. ☐ My only income was from **ACTIVE DUTY** military for the entire year. (This does not include civilians employed by the military.)
(ATTACH military W-2 and Federal 1040 (page 1 and 2))
7. ☐ I am **PERMANENTLY DISABLED** and only receive Social Security income or other non-taxable income.
(ATTACH Federal 1040 (page 1 and 2) and Social Security award letter) DATE AWARDED:

MO	DAY	YR
----	-----	----
8. ☐ I was a **COLLEGE STUDENT** with no taxable income for the entire year. MUST BE SUBMITTED BY FILING DEADLINE OR \$25 LATE FEE WILL APPLY.
(ATTACH IRS transcript or Federal 1040 (page 1 and 2), and copy of 1098-T)

FORMS WITHOUT REQUIRED ATTACHMENTS WILL NOT BE PROCESSED

Under penalties of perjury, I declare that I have examined this information, including all accompanying schedules and statements and to the best of my belief, they are true, correct, and complete.

SIGNATURE

DATE

SPOUSE SIGNATURE

DATE

PHONE

E-MAIL ADDRESS

TOTAL FEE:

\$ _____

Submit completed form and payment to:

CITY OF PICKERINGTON
100 Lockville Road
Pickerington, Ohio 43147
Fax: (614) 833-2201
Email: tax@pickerington.net