APPLICATION FOR EXTENSION OF TIME TO FILE VILLAGE OF FARMERSVILLE, OHIO INCOME TAX RETURN

TYPE OF RETURN: Partnership Sole Proprietorship Individual Corporate Social Security Number Name Federal Employee ID Number Address City, State, and Zip Code I request an extension of time to file the Village of Farmersville Income Tax Return for the above named individual/corporation, etc., until ______ for the tax year beginning and ending ______. 1. Does this application also cover subsidiaries to be included in a consolidated return? (If yes, complete Section 2 below.) YES NO 2. Provide name, address, and Federal Employee Identification Number or Social Security Number of each member of the affiliated group. 3. The above named individual/corporation, etc., has received an extension of the Federal Income Tax filing date to ______. (Attach a copy of Federal Extension) 4. Signature – Under penalties of perjury, I declare that I have been authorized by the above named individual/corporation, etc., to make this application for extension, and that to the best of my knowledge and belief, the statements made here are true, correct and complete. Name & Title Signature Date