

**MUST BE COMPLETED IN EMPLOYEE'S HANDWRITING
W-2 MUST BE ATTACHED**

**CLAIM FOR REFUND OF TAX WITHHELD
NON-RESIDENT OF WATERVILLE FOR TIME SPENT OUTSIDE WATERVILLE
YEAR _____**

During the period _____ thru _____ I was employed by _____ which employer compensated me in the amount of \$ _____ and withheld from such compensation Waterville Income Tax in the amount of \$ _____. During this period my legal residence was outside the City of Waterville as follows:

Street City, City or Township State Zip

During the above period I performed work as a _____ on behalf of my employer in areas outside the City of Waterville as follows: (Use reverse side if necessary.)

<u>CITY & STATE</u>	<u>EXACT DATES</u>	<u>CITY & STATE</u>	<u>EXACT DATES</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Weekends spent out of town are NOT to be included as days spent outside Waterville, if the employee's salary is based on a 40 hr. work week. Vacations, holidays, or sick days are not to be included as days spent outside Waterville.

Total number of days spent out of town from above _____ = _____ = % of time spent out of town.
Total no. of work days in the year (52 x 5) 260 days

SIGNATURE OF APPLICANT DATE

PRESENT MAILING ADDRESS SOCIAL SECURITY NUMBER

** I hereby Assign and transfer my rights, title and interest in this refund to my city of residence and authorize my city of residence to accept this refund on my behalf.

SIGNATURE OF APPLICANT

STATEMENT OF EMPLOYER

TO: COMMISSIONER OF WATERVILLE
CITY OF WATERVILLE, OHIO

Under penalties of perjury, the undersigned employer states that the above employee was employed by him during the period _____, 20____, thru _____, 20____, that \$ _____ was withheld as Waterville Income Tax from earnings paid said employee during that period; that he has examined this claim for refund of \$ _____ including accompanying schedules and statements and that to the best of his knowledge and belief this refund claim is true and correct; that the earnings claimed above were earned outside the corporate limits of the City of Waterville, and that no portion of said tax has been or will be refunded to said employee by employer.

NAME OF EMPLOYER DATE CERTIFIED BY: _____
AUTHORIZED REPRESENTATIVE

PREPARED BY: _____
PRINT OR TYPE EMPLOYEE'S NAME