



City of Lakewood
Division of Municipal Income Tax
12805 Detroit Ave
Lakewood, OH 44107
Telephone: (216) 529-6620
Fax: (216) 529-6099
www.ci.lakewood.oh.us

**Individual
Declaration of Exemption
Tax Year: _____**

This exemption form may not be used by those engaged in business, including those receiving, self-employment, Federal K-1 distributions or rental property located in The City of Lakewood

The City of Lakewood currently 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.

Social Security Number

Spouse's Social Security Number

Last Name First Name Initial

Spouse's Last Name First Name Initial

Present Address Apt #

City

State

Zip Code

Please circle one of the following and attach documentation when necessary.

1. I am permanently retired as of ____ / ____ / ____
2. No taxable income for all of the tax year _____.
3. I was under 18 years of age for the entire year of _____. Date of Birth: ____ / ____ / ____
(Please attach documentation-copy of Birth Certificate or Driver's License)
4. Active military duty for the entire year of _____.
5. I did not reside in the City of Lakewood for any part of the year. Date moved out of Lakewood: ____ / ____ / ____
(Please attach proof of move such as lease or proof of purchase date).
6. Full time student living on campus or in off campus housing and residing in the City of Lakewood for less than sixteen (16) consecutive weeks during the taxable year of _____ (Please attach proof. See Instructions for acceptable documentation).
7. I am filing jointly with my spouse _____ Social Security # _____.
8. Taxpayer is deceased. Date of Death: ____ / ____ / _____. (Please attach a copy of the death certificate).

I hereby declare the information supplied above to be true, correct and complete

Signature _____

Date _____

Spouse's Signature _____

Date _____

Telephone Number _____

Mail completed form to:
City of Lakewood
Division of Municipal Income Tax
12805 Detroit Ave. Lakewood, Ohio 44107
Form may be faxed: 216.529.6099

INSTRUCTIONS FOR FORM DECLARATION OF EXEMPTION

If you were a wage earner, were self-employed, owned rental property, had lottery or gambling winnings, or received a distribution from a partnership or s-corporation you are not exempt from the mandatory filing requirement and may not use this form.

1. If you were retired for the entire year in question, receiving only pension income, social security income and dividends or interest income and do not anticipate deriving any city taxable income, indicate so by filling in the date of your retirement.
2. If the taxpayer is not retired but did not receive any city taxable income for the year in question, circle box 2 and describe the nature of the income in the space provided. This exemption is for one year only and form "Declaration of Exemption" must be completed for each subsequent applicable year.
3. If you were under the age of eighteen (18) for the entire year in question, indicate so by filling in your date of birth. This exemption must be accompanied by proof of age (e.g. a photocopy of a birth certificate of driver's license)
Parents of Minors - If your child has received earned income and are under the age of eighteen (18), please check box 3 on the front of this page, note the birth date and submit above documentation.
4. If the taxpayer was an active member of the U.S. Armed Forces for the entire year in question, circle Box 4. Documentation verifying the dates of active duty status were during the tax year in question must be attached. This exemption is for one year only and Form "Declaration of Exemption" must be completed for each subsequent year.
5. If the taxpayer did not reside in the City of Lakewood for which the exemption is being claimed at all during the year in question, indicate so by filling in the date the taxpayer moved in or out of the municipality. Please attach proof of move such as a copy of your current year municipal income tax return, most recent leases or proof of the purchase date of your new residence.
6. Those individuals domiciled in the City of Lakewood who attended an accredited college or university for the entire year and lived on campus or in off campus housing and did not live in the City of Lakewood more than sixteen (16) consecutive weeks during the year will be considered exempt. Proof must be submitted with this form and may consist of transcript of grades, registration forms or billing statements. Be sure to include proof for each quarter or semester of the tax year and circle box 6 on this form. This exemption is for one year *only* and Form "Declaration of Exemption" must be completed for each subsequent year.
7. If the taxpayer has filed jointly with his/her spouse, indicate so by filling in the name of the spouse and provide his/her Social Security Number. If in a subsequent year, a married couple elects to file separately, it shall be the responsibility of each spouse to obtain and file a return.
8. If the taxpayer in question is deceased, the executor of the taxpayer's estate should indicate the taxpayer's date of death and supply a copy of the death certificate.

In all cases where the taxpayer is eligible for exemption, the taxpayer must provide his/her social security number, name, address and phone number.

This exemption form is not valid and will not be processed without the taxpayer's signature and date.

