

Full Name: \_\_\_\_\_  
Last First M.I.

Address: \_\_\_\_\_  
Street Address Apartment/Unit #

\_\_\_\_\_ City State ZIP Code

Date you moved in to address above: \_\_\_\_\_ Have you ever lived in Bedford before: YES ☐ NO ☐

If yes, what address: \_\_\_\_\_

Homeowner: YES ☐ NO ☐ If no, name & address of owner/landlord : \_\_\_\_\_

Home Phone: \_\_\_\_\_ Alternate Phone: \_\_\_\_\_

Email: \_\_\_\_\_

SSN or Gov't ID: \_\_\_\_\_

Birth Date: \_\_\_\_\_ Marital Status: \_\_\_\_\_ Tax Filing Status: \_\_\_\_\_

Spouse's Name: \_\_\_\_\_

Spouse's SSN: \_\_\_\_\_ Spouse's Phone: \_\_\_\_\_

Employer: \_\_\_\_\_

Spouse's Employer: \_\_\_\_\_  
(if applicable)

Unemployed: YES ☐ NO ☐ Disabled: YES ☐ NO ☐ Retired: YES ☐ NO ☐ If yes, date of retirement: \_\_\_\_\_

Name	SSN	Employer

**165 CENTER ROAD BEDFORD, OHIO 44146 PHONE (440-735-6505) FAX (440-439-1307)**  
**EMAIL: [tax@bedfordoh.gov](mailto:tax@bedfordoh.gov) All Tax Forms available at [www.bedfordoh.gov](http://www.bedfordoh.gov)**