



CITY OF MIAMISBURG
Collecting Agent for: Austin Center JEDD and Miami Crossing JEDD

ACH CREDIT ENROLLMENT FORM – WITHHOLDING PAYMENTS

We are requesting Payroll Agencies with more than 25 clients to file their clients' withholding returns and payments via ACH credit. The City of Miamisburg has adapted the CCD+ (sometimes identified as CCP) record format. The specifications for ACH Credit record layouts are available upon request.

To enroll in this program, complete, sign, and return this form to our office with a listing of your clients and federal identification numbers. This is so we can ensure the client has an established account with us. Please note, clients will need separate accounts for each taxing district they are withholding for.

Company Information:

Company Name: _____

Business Address: _____

City/State/Zip: _____

Approximate Number of Clients filing withholding returns: _____

Contact Information:

Contact Name: _____

Title: _____

Phone Number: _____

Fax Number: _____

Email Address: _____

The undersigned is enrolling in the City of Miamisburg ACH Credit Program for filing withholding returns and is requesting that Miamisburg provide the undersigned with the necessary authorization and bank information (routing number, account number, etc.).

Signature

Date

Printed Name

Title

**City of Miamisburg
Income Tax Department
Collecting Agency for:
Miami Crossing JEDD
Austin Center JEDD**

10 North First Street * Miamisburg, Ohio 45342
Phone: 937-847-6462 Fax: 937-847-6470
E-mail: incometax@cityofmiamisburg.com