



**NET PROFIT  
DECLARATION OF EXEMPTION  
(Business Use Only)**

INCOME TAX DEPARTMENT

1868 E. Perry Street, Port Clinton, OH 43452

(419) 734-5522 Option 4

**This exemption form may not be used by individuals who live in the City of Port Clinton or those individuals required to file a City of Port Clinton Individual Income Tax Return.**

Company Name:	FID#
Port Clinton Address:	City, State, Zip:
Phone #:	Fax#:

**Check the appropriate line:**

\_\_\_\_\_ No business was conducted in the City of Port Clinton in any part of the tax year \_\_\_\_\_.  
(tax year)

\_\_\_\_\_ The company is a courtesy withholding account for employees who reside in Port Clinton but do not work in Port Clinton. The company has conducted no business in the City of Port Clinton for the tax year \_\_\_\_\_.  
(tax year)

\_\_\_\_\_ We ceased operations in the City of Port Clinton on \_\_\_\_\_.  
(provide date)

\_\_\_\_\_ Other: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Attached additional documentation if needed**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Corporate Address

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Email Address

Mail Completed form to:  
City of Port Clinton, Income Tax Department  
1868 E. Perry Street, Port Clinton, OH 43452  
(P) 419-734-5522 (F) 419-732-6558 (E) [pcincometax@portclinton-oh.gov](mailto:pcincometax@portclinton-oh.gov)  
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