



City of St. Bernard

Tax Department

110 Washington Avenue, St. Bernard, Ohio 45217

Phone: (513) 242-7710 Fax: (513) 242-5402

E-mail: tax@cityofstbernard.org www.cityofstbernard.org

RETIRED / PERMANENT DISABILITY RESIDENT WAIVER OF TAX FILING

I am a resident of St. Bernard and I am now or have been fully retired / or permanently disabled. I am requesting a waiver so that I am no longer be required to file an annual tax return for the City of St. Bernard.

(Effective tax year 2004 - The St. Bernard Tax Code has required all residents to file an annual tax return.)

I understand that if in the future I should obtain earned income / rental income / business or partnership income / significant gambling winnings, I am required to file a tax return for the income earned in those tax years.

Name: _____
(Printed Name)

Address: _____ Apt # _____
St. Bernard, Ohio 45217

Social Security Number: _____

Date of Birth: _____

I have been: retired since _____ (year)

permanently disabled since _____ (year)

Signature: _____ Date: _____

(Office Use Only – Below this Line)

Effective tax year _____ the above listed resident of St. Bernard has been approved as a retired or permanently disabled individual and is now longer required to file an annual tax return.

Taxpayer is: retired permanently disabled

Account Tax Status has been adjusted

Tax Department Official

Date