

City of Springdale

Tax Department

KATHY McNEAR
Clerk of Council / Finance Director

JEFFREY T. WILLIAMS
Finance Officer / Tax Commissioner

DERRICK PARHAM
City Administrator

Dear Springdale Resident:

Re: Requirements of the Earnings Tax and Annual Tax Filing

The City of Springdale levies a one and a half percent (1.5%) earnings tax on all earned income. Filing of an annual City of Springdale income tax return is required by everyone who lives in Springdale, age 19 and older, regardless of your income, whether or not any tax is due. This requirement applies to both renters and homeowners.

Tax returns are due on April 15 of the subsequent year. Also, 70% of the tax liability is required to be paid by January 31 of the subsequent year. If you anticipate that you will owe tax, you should pay a quarterly estimate in order to avoid a penalty. Forms, extension requests, a complete listing of taxable/non-taxable items, and other information regarding the Tax Ordinance are available upon request or at the web-site www.springdale.org.

Proper administration of the tax ordinance depends on the accuracy of our records; therefore, we appreciate your prompt completion and return of the enclosed Resident Registration. Completion of this registration is necessary; however, the registration is not the annual tax filing.

The City of Springdale is pleased that you have chosen to reside here and we in the Tax Department want to do everything necessary to help you comply with the Tax Ordinance. If you require assistance with the completion of this registration, with the preparation of your Springdale tax forms, or if you have any questions, please contact us at the number listed below.

Remember, your tax dollars provide first-class fire and police protection, free garbage pick-up, an outstanding sports facility and Community Center, and many other amenities.

Very truly yours,

Springdale Tax Commission

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RESIDENT REGISTRATION

For Office Use Only - Account Number _____

Address _____

Date you moved into Springdale _____ Phone # _____
(If resident prior to age 19, please indicate year turned age 19.)

Your Name _____ Age _____ Social Security # _____
Employer(s) Name _____ Date began employment _____
City employed in _____ Does employer withhold a city tax on your income? Yes _____ No _____
What city? _____ Are you self employed? Yes _____ No _____ What city? _____

Spouse's Name _____ Age _____ Social Security # _____
Employer(s) Name _____ Date began employment _____
City employed in _____ Does employer withhold a city tax on your income? Yes _____ No _____
What city? _____ Are you self employed? Yes _____ No _____ What city? _____

Do either of you have business income? Partnership? Yes _____ No _____ S-Corp? Yes _____ No _____
Do you receive rental income? Yes _____ No _____ Address of each rental property:

Do you own your home? _____, live with family? _____, rent? _____ Name and address of landlord:

List below all other residents, age 19 and older, whether or not employed.

Name _____ Age _____ Social Security # _____
Date moved into Springdale _____ (If resident prior to age 19, please indicate year turned age 19.)

Name _____ Age _____ Social Security # _____
Date moved into Springdale _____ (If resident prior to age 19, please indicate year turned age 19.)

Name _____ Age _____ Social Security # _____
Date moved into Springdale _____ (If resident prior to age 19, please indicate year turned age 19.)

BY SIGNING THIS FORM, YOU CONFIRM THAT YOU LIVE IN SPRINGDALE AND ACKNOWLEDGE THAT YOU HAVE READ AND UNDERSTAND YOUR REQUIREMENT TO FILE AN ANNUAL TAX FORM WITH THIS CITY.

Taxpayer Signature: _____ Date: _____