

R.I.T.A. Estimate Worksheet

Name of Municipality _____ How did you hear about R.I.T.A.? _____

Total Tax \$ Collected _____ Year _____

Total \$ from Individual Accounts _____ Total # of Individual Accounts _____

Total \$ from Net Profit Accounts _____ Total # of Net Profit Accounts _____

Total \$ from Withholding Accounts _____ Total # of Withholding Accounts _____

Tax Rate _____ Tax Credit _____ Credit Limit _____ Population _____ Year _____

Do you participate in a JEDD, JEDZ, or ENTERPRISE ZONE?	YES	NO
If yes, does it include Withholding and Net Profits?	YES	NO
Do you capture SSN and FEIN in your tax system?	YES	NO
Do you participate in the Ohio Business Gateway (OBG)?	YES	NO
Do you receive State of Ohio Deregulated Utility Payments?	YES	NO
Do you have mandatory filing requirements even if there is no tax due?	YES	NO
Do you utilize the State of Ohio tax lists for non-filer compliance?	YES	NO
Are delinquent (non-paying) accounts kept in-house or sent to an outside firm?	IN-HOUSE	OUTSIDE
Do penalty and interest rates change/increase as a delinquency ages?	YES	NO
How many active payment plans do you have?		
Do you pursue delinquent (non-paying) accounts through civil action?	YES	NO
If yes, are civil actions handled in-house or assigned to an outside firm?	IN-HOUSE	OUTSIDE
How many civil suits are typically filed each year?		
What percentage of accounts are delinquent (non-paying)?		
What percentage of residents work outside the city/village?		
Are income tax receipts sent to your city/village or to a lockbox?	CITY/VILLAGE	LOCKBOX
Income Tax Department Budget (excluding refunds issued)		
Are costs associated with civil actions included in your Tax Dept budget?	YES	NO
Do you have a backlog of tax return processing?	YES	NO
If yes, how many returns are backlogged?		

Check services you use or offer E-FILE E-PAYMENT DOCUMENT IMAGING ON-LINE TAX CALCULATION

Tax System and Version -or- Third Party Administrator Name _____

Person completing this form:

Name _____ Title _____ Phone # _____ Date _____

Additional contact person:

Name _____ Title _____ Phone # _____

Completed forms may be faxed to 440.526.8013 • Please call 800.860.7482 with questions

Note: this information will be held in strict confidence and used solely for completing an estimate for tax collection services rev. Nov 2011