



FILE THIS FORM IF YOU ANTICIPATE OWING BY THE APRIL DUE DATE.
 (SEE NOTE BELOW):
CITY OF LANCASTER, OHIO
P.O. BOX 128, 104 EAST MAIN STREET
LANCASTER, OH 43130-0128
TEL # (740) 687-6606
FAX # (740) 681-5057
WEBSITE: www.ci.lancaster.oh.us

APPLICATION FOR EXTENSION OF TIME TO FILE LANCASTER CITY INCOME TAX RETURN

FOR CALENDAR YEAR ENDING DECEMBER 31, _____
 OR FISCAL PERIOD _____ TO _____

NAME(S) _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

SOCIAL SECURITY NO. OF TAXPAYER(S) OR FID# _____

PLEASE NOTE: You DO NOT need to request an extension to file by the April due date; however, a copy of the extension request or a copy of the Federal Extension (4868 or other) request MUST BE attached to the actual return at the time it is filed by the extension due date.

THIS IS NOT AN EXTENSION OF TIME TO PAY YOUR TAX

I request an automatic six (6) month extension of time to file the City of Lancaster Income tax for the year end _____

Fiscal year filers enter extended due date _____

1. Total Lancaster Tax Liability \$ _____

2. Total payments and credits (\$ _____)

3. Balance due. Subtract Line 2 from Line 1..... \$ _____

Complete the declaration of estimated tax due (below) for tax year 2018 if liability to Lancaster will exceed \$200.00

A. Estimated income subject to Lancaster tax \$ _____

Estimated tax due: 1.75% (.0175) times Line A \$ _____

B. Lancaster tax to be withheld by employer (\$ _____)

C. Credit allowed for income taxed by other cities (refer to Item #7 of General Instructions) (\$ _____)

D. DECLARATION OF ESTIMATED TAX DUE (Line A less Lines B and C) \$ _____

4. Amount of Declaration due. (Enter 25% of Line D if quarterly, 50% if semi-annually or 100% if annually) \$ _____
 Reminders for Quarters 2, 3 & 4 will be sent to you based upon the declaration and payments made.)

5. **Total amount due. Add Lines 3 and 4** \$ _____

SIGNATURE AND VERIFICATION

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete and, if prepared by someone other than the taxpayer, that I am authorized to prepare this form.

Signature of Taxpayer or Authorized Representative _____ Date _____

Signature of Spouse _____ Date _____

INSTRUCTIONS

You DO NOT need to request an extension to file by the April due date; however, a copy of the extension request or a copy of the Federal Extension (4868 or other) request MUST BE attached to the actual return at the time it is filed by the extension due date.

1. Complete this form if you need to pay your final balance due and 1st quarter estimated payment by April due date.
2. Be sure to attach copy of extension request or Federal Extension request (4868 or other) to your return at the time of filing.
3. Pay the entire amount shown on line 5 above by April due date.

This form does not extend the time to pay taxes. If you do not pay the amount due by the regular due date, you will owe interest and penalty. There is also a failure to file late fee that can be assessed. If you wish a return copy of the approved request, you must include a self-addressed stamped envelope.