THE CITY OF
COLUMBUS
ANDREW J. GINTHER, MAYOR

DEPARTMENT OF BUILDING
AND ZONING SERVICES

Commercial Sales Promoter Form W-2, Wage and Tax Statement Affidavit

Address: 4252 Groves Road, Columbus, Ohio 43232
Phone: 614-645-8366
Email: commsales@columbus.gov

Per the Internal Revenue Service, "Every employer engaged in a trade or business who pays renumeration, including noncash payments of $600 or more for the year (all amounts if any income, social security, or Medicare tax was withheld) for services performed by an employee must file a Form W-2 for each employee".

I, _____, representative of _____,
Name of Company Representative *Name of Company*

understand that by signing below, I must provide the City of Columbus License Section with a list of current and future Form W-2 employees prior to the issuance of a Commercial Sales Promoter license, or Commercial Sales license associated with said business.

I understand and certify that these statements are accurate and true. I also acknowledge the information contained herein may subject me to certain penalties under Columbus City Code 523.08 (b)(1), which include but are not limited to suspension, revocation, or permanent revocation of the Commercial Sales Promoter license being applied for.

State of _____, County of _____:

_____, bring duly sworn, deposes and says he or she is the
Print Representative Name

Individual making the foregoing application; that he or she is knowledgeable with respect to that which is to be licensed; that the answers to the foregoing questions and other statements contained herein are true of his or her own knowledge and belief.

_____
Representative Signature

Sworn to before me and subscribed in my presence, this _____ day of _____, _____

_____
Notary or Agent of Director of Building and Zoning Services