



**2020 HEBRON  
EXEMPT STATUS STATEMENT  
HEBRON INCOME TAX RETURN  
FILE BY: APRIL 15, 2021**

HEBRON TAX DEPARTMENT  
934 W. MAIN STREET  
HEBRON, OH 43025  
(740) 928-3641 FAX: (740) 928-5104

FORM H-12

OFFICE USE ONLY	
DATE REC'D	INITIALS
MAIL OFFICE DB CDB	
EXEMPTED <input type="checkbox"/> YES <input type="checkbox"/> NO LETTER LOGGED:	
PENALTY PAID	BATCH #
CASH CHECK MO CHG	

SOCIAL SECURITY #
SPOUSE SOCIAL SECURITY #
PHONE NUMBER (       )

IF NOT PRE-PRINTED, PRINT YOUR NAME & FULL ADDRESS HERE:

**PART A:** I AM QUALIFIED TO FILE THIS CITY E-Z FORM BECAUSE (Check items that apply):

1. I/we are retired. I/we have no income subject to Hebron Village Income Tax for entire year of 2020. I/we receive only non-taxable social security, pension, and/or interest/dividend income. I/we do not own rental property. I/we are not involved in any type of self-employment activity or receive any compensation for work or services rendered.

DATE RETIRED (mo day year): .....YOU: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ SPOUSE: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

2. I/we was/were unemployed and received no taxable income for all of 2020  
(Check section that applies):  Homemaker  SSN/Disability  Welfare/ADC  Student  Other (explain)
3. I was an active duty member of the Armed Forces of the United States for all of 2020. I did not receive any income taxable to the Village of Hebron (i.e. rental, business income, etc.).
4. I/we are non-residents. I/we have never lived in Hebron, Ohio. I/we have never received income from within Hebron that was not subject to full withholding of Hebron tax by employer(s).
5. I/we moved from Hebron, Ohio before 1/1/20. I/we did not receive any taxable income from within Hebron that was not subject to full withholding of Hebron tax by employer(s) since moving out of Hebron. NOTE: A college student with a legal address of Hebron is not exempt from Hebron Tax while living away at school. Only students with no taxable income can use this Form, see item 2 above.

DATE MOVED (mo day year): ..... \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

NEW ADDRESS: Street: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

6. I was under 16 years of age for ALL of 2020..... Date of birth (mo day year): \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_
7. Other, explain fully: \_\_\_\_\_  
\_\_\_\_\_

**PART B: EXEMPTION** from annual filing may be granted if your age, income and/or personal situation will allow it (notification of exemption will be sent to you). To assist us, please provide your:

DATE OF BIRTH (mo day year): .....YOU: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ SPOUSE: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**PART C: SIGNATURE.** I declare the information contained herein in true, correct and complete. Any misrepresentations will be a violation of the Income Tax Ordinance of the Village of Hebron, Ohio and subject to penalties there imposed.

\_\_\_\_\_  
TAXPAYER SIGNATURE

\_\_\_\_\_  
(DATE)

\_\_\_\_\_  
SIGNATURE OF SPOUSE - IF JOINT FILING

\_\_\_\_\_  
(DATE)