

TAX OFFICE

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Mason, Ohio 45040
P: 513.229.8535
F: 513.229.8531
tax@masonoh.org



AUTHORIZATION TO COMMUNICATE VIA E-MAIL City of Mason Tax Correspondence

NAME: _____

SPOUSE'S NAME (IF FILING JOINTLY): _____

ADDRESS: _____

LAST 4 DIGITS OF PRIMARY ACCOUNT HOLDER'S SOCIAL SECURITY NUMBER: _____

PHONE NUMBER: _____

E-MAIL ADDRESS: _____

I (we) understand that for verification purposes, a test e-mail will be sent to me (us) after receipt of this form. If my (our) e-mail address changes, I (we) will notify the Tax Office by submitting a new e-mail authorization form.

I (we) authorize the City of Mason to communicate tax information to us via the above e-mail address. These e-mails may include but are not limited to General Notices and Reminders, Estimated Tax Coupons, and Correction, No-File, or Balance-Due letters.

I understand that failure to receive e-mails sent by the Tax Office, for whatever reason, does not alter my responsibility to file tax returns, make payments, or reply to correspondences from the Tax Office.

Further, I understand that I may withdraw my permission to communicate via e-mail at any time by notifying the Mason Tax Office in writing or via e-mail.

Signature

Date

Spouse Signature

Date