

Name \_\_\_\_\_  
Job/PCN Applying For: \_\_\_\_\_

**ATTACHMENT TO APPLICATION**

1. Please list any of your business associates who are employed by the Ohio Department of Taxation. Business associates are defined as parties who are joined together in a relationship for business purposes or acting together to pursue a common business purpose or enterprise.

Name (s)

( ) No, I have no business associates who are employed by the Ohio Department of Taxation.

2. Please list the names and relationship of any employees in this agency who are closely related to you by blood or marriage. This is defined to include, but is not limited to, a spouse, children (whether dependent or not), parents, grandparents, siblings, and other persons related by blood or marriage and residing in the same household.

Name (s)

Relationship

( ) No, I have no family members as defined above who are employed by the Ohio Department of Taxation.

Signature of Applicant: \_\_\_\_\_

Subscribed and duly sworn before me according to law, by the above named applicant this

\_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ at \_\_\_\_\_,

County of \_\_\_\_\_ and State of \_\_\_\_\_.

Signature of Officer: \_\_\_\_\_

Official Title: \_\_\_\_\_