



## **CITY OF CANBY TRANSIT TAX REGISTRATION FORM**

This form is intended for those entities that have a tax liability to the Canby Area Transit Tax District (zip code 97013\*), but that are not required to have a City of Canby business license. If you are unsure whether this form is required, please contact us. Email completed form or questions to [transitpayrolltax@canbyoregon.gov](mailto:transitpayrolltax@canbyoregon.gov) or call 503-266-0687. Thank you.

### **1. Please identify the type of filing entity (check one):**

Professional Employer Organization (PEO), an employee leasing company or a co-employer

Employer of Individual(s) Working Remotely from the Canby Area Transit Tax District

Payroll Service submitting on behalf of Employer of Individual(s) Working Remotely from the Canby Area Transit Tax District

Local business operating outside the City limits but inside the Canby Urban Growth Boundary

If this option is selected, please indicate if the business is subject to payroll filing or self-employment filing.          Payroll                          SE

### **2. Please complete information about the location of the taxable activity and the employer:**

Name of the business, company or co-employer \_\_\_\_\_

The physical address, within the Canby Area Transit Tax District where reportable wages are being earned:

\_\_\_\_\_  
**(Note: Tax is applicable in zip code 97013 only\*)**

### **3. Please complete information about the tax filings:**

Start date of the tax liability \_\_\_\_\_

Name, address and Federal Tax ID number that will appear on the tax return form

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Fed ID#: \_\_\_\_\_

### **4. Please complete the following information about the entity that will be submitting the filings:**

Entity name: \_\_\_\_\_

Contact person: \_\_\_\_\_

Contact phone: \_\_\_\_\_

Contact email address: \_\_\_\_\_