Withholding Certificate – Aurora Occupational Privilege Tax

This form is furnished to, and is to be completed by the principal Aurora employer upon request by an employee.

COMPLETE SECTIONS A and B if you have an employee who has a secondary Aurora employer from whom they receive $250 or more per month. A copy of this form, completed by the primary employer, must be delivered to the secondary employer in order to excuse the secondary employer from collecting the OPT tax. The secondary Aurora employer must retain the withholding certificate for a three-year period.

COMPLETE SECTIONS A and C if you have an employee who is leaving your employ and ALL THE FOLLOWING CONDITIONS EXIST:

1. The employee’s termination date is other than the end of a calendar month;
2. You have withheld the tax for such month and;
3. The employee anticipates receiving more than $250 during such month from their next employer.

SECTION A

I certify that

_________________________________________  _______________________
Last Name                           Middle Initial       First Name  

is an employee of

_________________________________________  _______________________
Company Name and Address

We are his principal Aurora employer and… (Complete B or C below)

SECTION B

We will withhold the Aurora Employee Occupational Privilege Tax beginning with the month of __________, 20____, and each taxable month thereafter while in our employ.

SECTION C

We have withheld the Aurora Occupational Privilege Tax for the month

of __________________, 20____.

_____________________________________  _______________________
Authorized Signature             Date

of Principal Aurora Employer

Form No. WC/AOPT (5/06)