

WITHHOLDING CERTIFICATE – DENVER OCCUPATIONAL PRIVILEGE TAX

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

COMPLETE SECTIONS A and B if you have an employee who has a secondary employer from whom he receives \$500.00 or more per month. The secondary employer's copy may be delivered to him by the employee. The employee must sign the bottom of the secondary employer's copy each month. The secondary 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. His/Her termination date is other than the end of a calendar month;
2. You have withheld the tax for such month and;
3. He/She anticipates receiving more than \$500.00 during such month from his/her next employer.

SECTION A

I certify that _____ is an employee
of _____
Last Name Middle Init. First Name
Firm Name and Address

We are his/her principal employer and (Complete B or C below.)

SECTION B

We will withhold the Denver 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 Denver Occupational Privilege Tax for the month of _____, 20_____.

_____ Date

_____ Authorized Signature

I declare, under the penalties of perjury, that my principal employer, as designated on the face of this certificate, has withheld the Denver Occupational Privilege Tax for the following periods:

Month	Year	Signature	Month	Year	Signature