

# CITY OF PARMA – DIVISION OF TAXATION

6611 RIDGE ROAD  
PARMA, OH 44129

MON - FRI  
8:30 AM TO 4:30 PM

PHONE: (440) 885-8045 – FAX: (440) 885-8044

NAME \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
CITY/STATE/ZIP \_\_\_\_\_

**D ESTIMATE OF QUARTERLY TAX DUE**  
Quarterly Billing for **Estimated** Parma Income Tax for Year 2024 Quarter

| Account Number | FID Number | SSN Number | Due Date | Amount Due |
|----------------|------------|------------|----------|------------|
|                |            |            |          |            |

Declaration For Tax Year 2024

Less Payments This Year

Less Credits From Prior Years

Total Yet To Pay This Year \_\_\_\_\_

Amount due by

**PENALTY AND INTEREST MUST BE ASSESSED WHEN FILING ANNUAL RETURN IF  
90% OF TAX OWED WAS NOT PAID ON DECLARATION BY JANUARY 15, 2025.**

RETAIN THIS UPPER PORTION FOR YOUR RECORDS. DETACH AND RETURN THE FORM BELOW  
WITH YOUR PAYMENT IN THE ENCLOSED ENVELOPE

**D ESTIMATE OF QUARTERLY TAX DUE**  
Quarterly Billing for **Estimated** Parma Income Tax for Year 2024 Quarter

| Account Number | FID Number | SSN Number | Due Date | Amount Due |
|----------------|------------|------------|----------|------------|
|                |            |            |          |            |

NAME \_\_\_\_\_ Make Check Payable To: CITY OF PARMA DIV OF TAX  
ADDRESS \_\_\_\_\_  
CITY/STATE/ZIP \_\_\_\_\_ Mail Check To: CITY OF PARMA  
6611 RIDGE RD  
PARMA, OH 44129

IF YOU HAVE MOVED GIVE US THE DATE \_\_\_\_\_ AND YOUR NEW ADDRESS