



**INCOME TAX DIVISION  
DEPARTMENT OF FINANCE**

1 Cascade Plaza - Suite 100  
Akron, Ohio 44308-1161

Donald W Smith, CPA  
Tax Commissioner

Telephone: 330-375-2290  
Fax: 330-375-2112  
Email: [incometax@akronohio.gov](mailto:incometax@akronohio.gov)  
[www.akronohio.gov/1040](http://www.akronohio.gov/1040)

Dear Taxpayer,

Use the Non-Resident Employee Refund Application if your request is for days worked outside of Akron. You must complete the entire form. Then have the days worked in Akron verified for accuracy by your employer. (The appropriate individual is one who has legal authority to sign for the company and knows your work schedule.)

In addition, please be advised that we will be notifying your resident city. It appears that one of the intentions of the new State law is to hold the employee responsible to pay either the city where the work was performed or the base city of employment, when both are taxing municipalities. Since you are receiving a refund of taxes withheld for your base city of employment, the city of residence may elect to pursue recovery of these dollars.

Refunds are issued within 90 days after the City has receipt of the correctly completed Refund Application and itinerary forms, or after receipt of the employer's correct AW-3 reconciliation form, including all W-2 information, whichever is later.

Sincerely,  
Income Tax Division  
Refund Section  
330-375-2039

Revised: 1/2024

For Tax Year \_\_\_\_\_

**NON-RESIDENT EMPLOYEE REFUND APPLICATION**

**For Days Worked Out of Akron  
Or Taxes Over Withheld by Employer**

During the year \_\_\_\_\_, my employment with \_\_\_\_\_ located in the City of Akron, required me to perform services both inside and outside the corporate boundaries of the City as follows:

**Total Days Paid** 52 Weeks @ 5 Days per Week or 260 Working Days:

(or dates of employment -beginning \_\_\_\_\_ thru \_\_\_\_\_ )

**Number of Working Days Outside Akron \_\_\_\_\_ To be Refunded**

**Number of Working Days In Akron \_\_\_\_\_**

**(Attach itinerary)**

**OR**

During the year \_\_\_\_\_, my employer \_\_\_\_\_ over withheld Akron city income taxes for the following reason:

Work from home      Withheld in error      Over withheld      OTR driver      Other \_\_\_\_\_

Under penalties of perjury I hereby certify that the information provided herein is true, correct and complete to the best of my knowledge and belief.

\_\_\_\_\_  
Print Employee's Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Employee's Signature

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Employee's Street Address

\_\_\_\_\_  
Daytime Phone Number

\_\_\_\_\_  
Employee's City, State, Zip

\_\_\_\_\_  
City of Residence

**You must attach copies of W-2's showing Akron wages and Akron income taxes withheld.**

**We will calculate and issue a refund (if any) based on the information provided.**

Payment will be made within 90 days of receipt of the completed refund request and receipt of a completed employer annual withholding return OR within 90 days of April 15th of the year following the tax year at issue, whichever is later.

**~ ~ ~ ~ ~ EMPLOYER'S VERIFICATION ~ ~ ~ ~ ~**

The number of days work in Akron shown above reflect actual working days at principal place of work. Additionally, no refund of withheld taxes have been paid to employee.

\_\_\_\_\_  
Employer's / Manager's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Employer's / Manager's Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Employer's / Manager's Phone Number and Extension

**Please mail completed form and copy of W-2 to:**

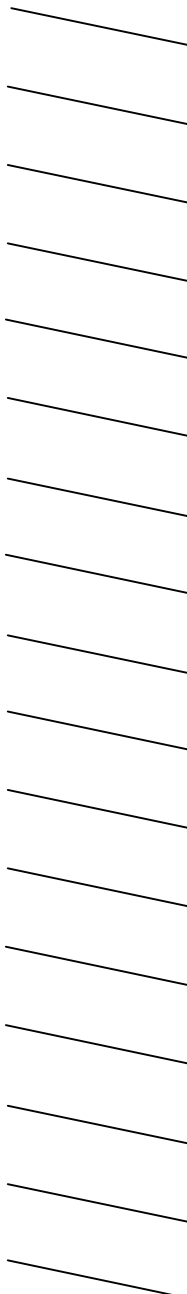
**Income Tax Division -1 Cascade Plaza – Suite 100 -Akron, OH 44308**

Forms are available at [akronohio.gov/1040](http://akronohio.gov/1040) or by calling 330-375-2039.

Name \_\_\_\_\_

Date \_\_\_\_\_

**ITINERARY FOR DAYS WORKED OUT OF AKRON**



Date From To	Purpose of Trip	Days	Days	Days	Days	Days	Days	Days	Days	Days	Days	Days	Days	Days	Days	
<b>PAGE TOTAL</b>																

Do Not Include Vacation, Sick, Holiday, Weekends or Other Paid Non-Working Days.