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.

	certify that	Last Name				is an employee	
of	f	Last Name	Middle Init		First Name		
OI	1		Firm Name and Ad	dress			
Ve are h	is/her principa	l employer and (Cor	mplete B or C below	.)			
ECTIO	N B						
		d the Denver Employee, 20, and eac		_	beginning with the mont hile in our employ.	h of	
ECTIO	N C						
W	Ve have withhe	ld the Denver Occupation	onal Privilege Tax f	or the mo	nth of	_, 20	
		_	Authorized Signature				
					as designated on the fac	e of this certificate	
	as withheld the	Denver Occupational F	Privilege Tay for the	followin	g neriods:	e of this confinence	
	as withheld the	Denver Occupational F	Privilege Tax for the	followin	g periods:	o or this confinence	
	as withheld the	Denver Occupational F Signature	Privilege Tax for the Month	followin Year	g periods: Signa		
ha							

Month	Year	Signature	Month	Year	Signature