



CITY OF GLEN DALE

402 Wheeling Avenue • Glen Dale, WV 26038

Worker City Service/User Fee Remittance Form QUARTERLY

Account #:

Due Date:

Business Name:

Effective Dates:

Business Address:

Account Type: SERVICE/USER FEE QTR

Filing period #:

Instructions for Employer Worksheet This form must be completed based on the Basis of Computation method chosen by the Employer disclosed on the worksheet. The dates entered in lines "1" through "13", Column A shall be the ending dates for each weekly, biweekly, semi-monthly, or monthly pay period, depending on the period used and elected by the Employer, throughout the entire reporting period. The total on each line, Column B is multiplied by the appropriate rate (depending upon the Basis of Computation withholding method) to determine the total in column C. Add Column C lines 1 through 13 to calculate the total Worker City Service/User Fee due to be remitted for the reporting period.

COMPUTATION OF WORKER CITY SERVICE/USER FEE

Basis of Computation (Choose One)	Weekly - \$1.00	Bi-Weekly - \$2.00	Semi-Monthly - \$2.17	Monthly \$4.33
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	A PAY PERIOD / WEEK ENDING DATE	B NUMBER OF EMPLOYEES/SELF- EMPLOYED IN GLEN DALE	C TOTAL FEE CALCULATED
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
PENALTIES: 5% OF THE TOTAL FEE AFTER THE DUE DATE, PLUS 2% FOR EACH ADDITIONAL 30 DAYS AFTER			\$
TOTAL AMOUNT DUE			\$

**MAKE CHECKS
PAYABLE TO CITY
OF GLEN DALE
REMIT FORM &
PAYMENT TO:
City Clerk's Office
402 Wheeling Ave
Glen Dale, WV
26038**

DECLARATION

UNDER PENALTIES OF PERJURY, I ATTEST I HAVE PREPARED THIS FORM AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, IT IS TRUE, ACCURATE, AND COMPLETE. I ALSO UNDERSTAND A COPY OF THIS FORM IS TO BE RETAINED BY THE EMPLOYER.

SIGNATURE OF PREPARER

TITLE OF PREPARER

DATE

THIS FORM MUST BE RETURNED WITH PAYMENT

WORKER CITY SERVICE/USER FEE INSTRUCTIONS

To complete this form please record the ending dates for each payroll cycle in column A. Multiply the value entered in Column B by the appropriate rate in the chart below and enter the total fee calculated into column C.

PAY PERIOD / WEEK ENDING DATE	AMOUNT PER EMPLOYEE
WEEKLY	\$ 1.00
BI-WEEKLY	\$ 2.00
SEMI-MONTHLY	\$ 2.17
MONTHLY	\$ 4.33

At the end of the quarter, add Column C lines 1 through 13 to calculate the total fee due. This amount will be remitted to the City of Glen Dale for the appropriate reporting period. If submitted after the stated due date, add the appropriate penalty to the total fee due to calculate the new total amount due.

For additional information please contact the City Clerk's Office at (304) 845-5511 or email glendalewv@glendalewv.gov.

QUARTER	PERIOD	DUE DATE
1ST	January 1 – March 31	April 30th
2ND	April 1 – June 30	July 31st
3RD	July 1 – September 30	October 31st
4TH	October 1 – December 31	January 31st

PLEASE UPDATE YOUR BUSINESS / CONTACT INFORMATION BELOW

BUSINESS NAME	
BUSINESS ADDRESS	
PHONE NUMBER	
FAX	
EMAIL	