



**City of Canfield**  
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Finance Fax: 330-533-2668  
[www.canfield.gov](http://www.canfield.gov)



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# **JOB OPPORTUNITY**

## **INCOME TAX ADMINISTRATOR**

Current Starting Salary Range: \$52,000 - \$60,444

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*Following is a brief overview of the position. Please review the entire job description (attached) for a complete listing of the essential duties, responsibilities, physical demands and working environment, minimum qualifications, and other requirements of this position.*

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### **Minimum Qualifications:**

- Bachelor's degree in Accounting or Finance required.
- Minimum 2-4 years of experience in accounting practices (governmental experience preferred).
- Public accounting tax experience and the ability to implement process improvements is preferred.
- Ability to multi task in an organized and efficient manner.
- High level of attention to detail & maintaining a high level of accuracy over extended periods of time.
- Exceptional interpersonal, oral and written communication skills.
- Excellent time management skills, ability to manage self-directed worktime and prioritization of tasks.
- Prior to appointment, the applicant must pass a CVSA, background check and a physician must sign off on the job description.
- Neat and clean appearance.
- Must be bondable in the State of Ohio to the limits set by the City of Canfield.
- "Income Tax Administrator" is a non-union, non-civil service position, which serves at the pleasure of the City Manager.

### **How to Apply:**

Interested candidates shall submit a resume and completed job application (attached) no later than 4:00 p.m. on Wednesday, October 26, 2022. Resume and completed job application can be submitted to the City Receptionist or may be email to [pbernat@canfield.gov](mailto:pbernat@canfield.gov). Qualified candidates will be notified of their eligibility to participate in the hiring process.

*The City of Canfield is an Equal Opportunity Employer and maintains a policy of Equal Employment Opportunity for all employees and applicants. The City of Canfield does not discriminate in employment or the provision of services on the basis of race, color, national origin and ancestry, gender (sex), religion, age, disability, sex (wages), military status, genetic information, pregnancy, or any other characteristic protected by Federal or State law.*

**Date Posted: 9/29/2022**



## CLASSIFICATION SPECIFICATION

CITY OF CANFIELD

AN EQUAL OPPORTUNITY EMPLOYER

UPDATED (9/29/22)

# Class Title: Income Tax Administrator

### REQUIRED QUALIFICATIONS FOR APPOINTMENT

- Must be at least 21 years of age
- Bachelor's degree in Accounting or Finance required.
- Minimum 2-4 years of experience in accounting practices (governmental experience preferred).
- Public accounting tax experience and the ability to implement process improvements is preferred.
- Ability to multi task in an organized and efficient manner.
- High level of attention to detail & maintaining a high level of accuracy over extended periods of time.
- Clear diction and legible handwriting.
- Experience and proficiency in Microsoft Office software, specifically Excel, is required.
- Exceptional interpersonal, oral and written communication skills.
- Excellent time management skills, ability to manage self-directed worktime and prioritization of tasks.
- Prior to appointment, the applicant must pass a CVSA, background check and a physician must sign off on the job description.
- Neat and Clean appearance.
- Valid Ohio driver's license (or available transportation).
- Must be bondable in the State of Ohio to the limits set by the City of Canfield.
- "Income Tax Administrator" is a non-union, non-civil service position, which serves at the pleasure of the City Manager.
- The probationary period for the position of "Income Tax Administrator" will be twelve (12) months.
- Other qualifications as deemed necessary by the City Manager and/or Finance Director.

### JOB DESCRIPTION

#### (FACTORS AND CONDITIONS WHICH ARE ESSENTIAL CHARACTERISTICS OF THE POSITION)

This is a responsible and professional position in the City of Canfield Income Tax Division, working with extremely sensitive and confidential tax documents and data. The Income Tax Administrator ensures taxpayer compliance and accuracy in reporting, pursuant to the provisions of the City of Canfield Income Tax Ordinance, Ohio Revised Code, and the Internal Revenue Code. The position involves extensive contact with tax professionals and the general public, and periodic contact with other departments in the City. Duties include, but are not limited to, assisting all taxpayers by answering tax questions, preparing City tax forms, arranging for the payment of tax, and conducting audits.

The responsibilities of the Income Tax Administrator require consistent attention and commitment to this City of Canfield's mission. All assigned duties and tasks are expected to be performed in an effective, efficient and professional manner. Personal conduct and behavior must be such that it does not bring disrepute or unnecessarily endanger the public's trust or confidence in the city or its members.

Successful candidates must be computer literate with strong typing skills, conflict resolution/interpersonal skills, mathematical and problem-solving skills, self-initiative, a strong ability to multi-task, and the ability to work with minimal supervision.

## MAJOR RESPONSIBILITIES & DUTIES

The duties listed below are intended only as illustrations of the various types of work that may be performed. The omission of specific statements of duties does not exclude them from the position if the work is similar, related, or a logical assignment to the position.

Under the supervision of the Finance Director, the Income Tax Administrator will be responsible for the administration of all city tax related matters. These tasks include, but are not limited to the following:

- Interprets, applies, and correlates information from the City Ordinance and the Ohio Revised Code to respond accurately to a broad range of taxpayers' and tax practitioners' inquiries.
- Ensures that tax receipts, refunds, and taxpayer inquiries or protests are processed in a timely manner.
- Answers questions and assists taxpayers with e-File and e-Pay electronic transactions.
- Assists taxpayers in preparing city tax returns reporting taxable income, and estimated tax.
- Pre-audits tax returns. Ensures that all source documentation is attached to returns: W-2, 1099, Schedule C, Schedule E, 1065K-1, etc. Sends written requests for source materials and schedules as needed. Checks tax returns and accompanying documents for mathematical accuracy. Notifies taxpayer or tax preparer of corrections and amendments, in writing.
- Remains proficient in MITS software to maximize the use and efficiency of the database, reports, applications, etc.
- Accepts, verifies, posts, and reconciles tax transactions, including payments to proper accounts.
- Locates, setting up and maintaining new income tax accounts.
- Maintains record of landlords within the city, and sends out occupancy forms where required.
- Stays abreast of state/federal tax law changes that affect municipal income tax; and inform Finance Director to ensure City of Canfield ordinances remain in compliance.
- Keeps annual tax forms, instructions, processes and procedures revised and updated.
- Sends non-compliance notifications to the police department for the issuance of summons and attends Canfield Mayor's court for cases where tax summonses are issued.
- Interacts with the City Income Tax Board and City Council as needed.

## WORK CONDITIONS

The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of the job. Reasonable accommodations may be made to enable individuals with disabilities to perform the essential functions.

The work performed in this capacity is almost exclusively in an indoor, office setting. Primary functions require sufficient physical ability and mobility to work in an office setting; to stand or sit for prolonged periods or time; occasionally stoop, bend, kneel, crouch, reach and twist; to lift carry push and/or pull light to moderate amounts of weight; to operate office equipment requiring repetitive hand movement and fine coordination including use of a computer keyboard.

The Income Tax Administrator schedule will be Monday - Friday 8:00am – 4:30pm.

**CITY OF CANFIELD**  
**INCOME TAX ADMINISTRATOR APPLICATION**

**UPDATED (9/29/22)**

<b>Application for Employment</b>		Qualified applicants are considered for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, or the presence of any non-job related medical condition or handicap.	
Application Date		Referred by	Positions(s) Applied For:
<b>Personal Information</b>	Social Security No.		<input type="checkbox"/> Full Time Income Tax Administrator
	U.S. Citizen: <input type="checkbox"/> Yes <input type="checkbox"/> No		
NAME (Last, First, Middle)		Area Code & Phone Number	
CURRENT ADDRESS (Street, Apt, City, State, Zip Code)		Length of Time at Address	
PREVIOUS ADDRESS (Street, Apt, City, State, Zip Code)		Length of Time at Address	
PREVIOUS ADDRESS (Street, Apt, City, State, Zip Code)		Length of Time at Address	
<b>Education High School</b>	SCHOOL NAME: FULL ADDRESS:		<input type="checkbox"/> Diploma Received <input type="checkbox"/> G.E.D. Received  Date Received:
	GPA	Course of Study	Awards/Honors/Offices Extracurricular Activities
Attendance Record		Favorite Class	
<b>Education Undergraduate</b>	SCHOOL NAME: FULL ADDRESS:		<input type="checkbox"/> Associate Degree <input type="checkbox"/> Bachelors Degree  Date Received:
	GPA	Major / Minor	Awards/Honors/Offices Extracurricular Activities
Why was this school chosen?			
Attendance Record		Favorite Class	
<b>Education Graduate</b>	SCHOOL NAME: FULL ADDRESS:		<input type="checkbox"/> Masters Degree  Date Received:
	GPA	Major / Minor	Awards/Honors/Offices Extracurricular Activities
Why was this school chosen?			
Attendance Record		Favorite Class	
<b>Education Other</b>	SCHOOL NAME: FULL ADDRESS:		<input type="checkbox"/> Masters Degree  Date Received:
	GPA	Course of Study	Awards/Honors/Offices Extracurricular Activities
Why was this school chosen?			
Attendance Record		Favorite Class	
<b>Military Information</b>	Branch		From: To
	Highest Rank or Grade	Terminal Rank or Grade	Type of Discharge
Nature of Duties: Awards/Honors:			

**Over**

## CITY OF CANFIELD: INCOME TAX ADMINISTRATOR

<b>Employment Information</b>	List <b>ALL</b> employment starting with your present position, then the last position before that, and so forth. Use additional forms if needed.		
<b>#1:</b> From:                      To	Company Name		Position / Title Held
LOCATION (Street, City, State, Zip Code)			Immediate Supervisor
Other Supervisor:	Other Supervisor:	Other Supervisor:	
Responsibilities:			
What did you like most about your job?			
What did you least enjoy?			
Reasons for leaving:			
Compensation:			
Attendance Record:			
Permission to contact for background check? <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Signature:</b>			
<b>#2:</b> From:                      To	Company Name		Position / Title Held
LOCATION (Street, City, State, Zip Code)			Immediate Supervisor
Other Supervisor:	Other Supervisor:	Other Supervisor:	
Responsibilities:			
What did you like most about your job?			
What did you least enjoy?			
Reasons for leaving:			
Compensation:			
Attendance Record:			
Permission to contact for background check? <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Signature:</b>			
<b>#3:</b> From:                      To	Company Name		Position / Title Held
LOCATION (Street, City, State, Zip Code)			Immediate Supervisor
Other Supervisor:	Other Supervisor:	Other Supervisor:	
Responsibilities:			
What did you like most about your job?			
What did you least enjoy?			
Reasons for leaving:			
Compensation:			
Attendance Record:			
Permission to contact for background check? <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Signature:</b>			

**Over**

## CITY OF CANFIELD: INCOME TAX ADMINISTRATOR

<b>#4:</b> From:	To	Company Name	Position / Title Held
LOCATION (Street, City, State, Zip Code)			Immediate Supervisor
Other Supervisor:	Other Supervisor:	Other Supervisor:	
Responsibilities:  What did you like most about your job?  What did you least enjoy?  Reasons for leaving:  Compensation:  Attendance Record:  Permission to contact for background check? <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Signature:</b>			
<b>#5:</b> From:	To	Company Name	Position / Title Held
LOCATION (Street, City, State, Zip Code)			Immediate Supervisor
Other Supervisor:	Other Supervisor:	Other Supervisor:	
Responsibilities:  What did you like most about your job?  What did you least enjoy?  Reasons for leaving:  Compensation:  Attendance Record:  Permission to contact for background check? <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Signature:</b>			
<b>#6:</b> From:	To	Company Name	Position / Title Held
LOCATION (Street, City, State, Zip Code)			Immediate Supervisor
Other Supervisor:	Other Supervisor:	Other Supervisor:	
Responsibilities:  What did you like most about your job?  What did you least enjoy?  Reasons for leaving:  Compensation:  Attendance Record:  Permission to contact for background check? <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Signature:</b>			

**Over**

## CITY OF CANFIELD: INCOME TAX ADMINISTRATOR

<b>#7:</b> From:	To	Company Name	Position / Title Held
LOCATION (Street, City, State, Zip Code)			Immediate Supervisor
Other Supervisor:	Other Supervisor:	Other Supervisor:	
Responsibilities: What did you like most about your job? What did you least enjoy? Reasons for leaving: Compensation: Attendance Record: Permission to contact for background check? <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Signature:</b>			
<b>#8:</b> From:	To	Company Name	Position / Title Held
LOCATION (Street, City, State, Zip Code)			Immediate Supervisor
Other Supervisor:	Other Supervisor:	Other Supervisor:	
Responsibilities: What did you like most about your job? What did you least enjoy? Reasons for leaving: Compensation: Attendance Record: Permission to contact for background check? <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Signature:</b>			
<b>#9:</b> From:	To	Company Name	Position / Title Held
LOCATION (Street, City, State, Zip Code)			Immediate Supervisor
Other Supervisor:	Other Supervisor:	Other Supervisor:	
Responsibilities: What did you like most about your job? What did you least enjoy? Reasons for leaving: Compensation: Attendance Record: Permission to contact for background check? <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Signature:</b>			
<b>Is there Other Employment NOT listed above?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No. If "Yes," please list all other employment on a separate sheet of paper and attach to this form! If "No," Applicant hereby certifies that all employment is hereby accounted for on this application, and further understands that failure to disclose any previous employment is grounds for termination in the event that applicant is hired with this organization.			
<b>Signature:</b>			

**Over**

## CITY OF CANFIELD: INCOME TAX ADMINISTRATOR

<b>Job Related Questions / Plans / Goals</b>	
List all related certifications you have attained:	
What special skills, experiences or qualifications, related to the position(s) applied for, do you possess? (Sell yourself).	
List all other communities which you have <i>current applications</i> filed. Note status of employment opportunities for each application (best guess):	
<b>If applying for a part time position:</b> What are your available hours and days to train and work at this agency?	
What are your long-term goals for employment?	
Do you have any driving record? <input type="checkbox"/> Yes <input type="checkbox"/> No. If "Yes," please explain.	
Do you have any prior Driving Under the Influence convictions? <input type="checkbox"/> Yes <input type="checkbox"/> No. If "Yes," please explain.	
Applicant hereby certifies that all driving record history within the past five years is hereby accounted for on this application, and further understands that failure to disclose any previous or pending driving record is grounds for termination in the event that applicant is hired with this agency. Applicant hereby grants permission to the Canfield Police Department to conduct a license records check through all available sources.	
<b>Signature:</b>	
Are you computer literate? <input type="checkbox"/> Yes <input type="checkbox"/> No. If "Yes," please explain.	
What programs are you familiar with?	
To what extent?	
Can you type? <input type="checkbox"/> Yes <input type="checkbox"/> No.	
I hereby authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for dismissal. I further understand and agree that my employment is for no definite period of time and may be terminated at any time with notice, with consideration given to any applicable state, federal, or civil service rules or laws.	
<b>Date:</b>	<b>Signature:</b>

**Please feel free to include your current resume and copies of applicable certifications with this application.**



**CITY OF CANFIELD CITY OF CANFIELD: INCOME TAX ADMINISTRATOR**

**WAIVER OF CONFIDENTIAL RECORDS**

Name (print)		Date of Birth	Social Security Number	
Address:	Street	City	State	Zip Code

To Whom It May Concern: I am an applicant for a position with the City of Canfield public works department. The department needs to thoroughly investigate my background and personal history to evaluate my qualifications to hold the position for which I applied. It is in the public's interest that all relevant information concerning my personal and employment history be disclosed to the above department.

I hereby authorize any representative of the City of Canfield bearing this release to obtain any information in your files pertaining to my employment records and I hereby direct you to release such information upon request of the bearer. I do hereby authorize a review of full disclosure of all records, or any part thereof, concerning myself, by and to any duly authorized agent of the Canfield Police Department, whether said records are of public, private, or confidential nature. The intent of this authorization is to provide full and free access to the background and history of my personal life, for the specific purpose of pursuing a background investigation that may provide pertinent data for the Canfield Police Department to consider in determining my suitability for employment in that department. It is my specific intent to provide access to personal information, however personal or confidential it may appear to be.

I consent to your release of any and all public and private information that you may have concerning me, my work record, my background and reputation, my military service records, educational records, my financial status, my criminal history record, including any arrest records, any information contained in investigatory files, efficiency ratings, complaints or grievances filed by or against me, the records or recollections of attorneys at law, or other counsel, whether representing me or another person in my case, either criminal or civil, in which I presently have, or have had an interest, attendance records, polygraph examinations, and any internal affairs investigations and discipline, including any files which are deemed to be confidential, and/or sealed.

I hereby release you, your organization, and all others from liability or damages that may result from furnishing the information requested, including any liability or damage pursuant to any state or federal laws. I hereby release you, as the custodian of such records of your organization, including its officers, employees or related personnel, both individually and collectively, from any and all liability for damages of whatever kind, which at any time result to me, my heirs, family, or associates because of compliance with this authorization and request to release information, or any attempt to comply with it. I direct you to release such information upon request of the duly accredited representative of the Canfield Police Department regardless of any agreement I may have made with you previously to the contrary. The law enforcement organization requesting the information pursuant to this release will discontinue processing my application if you refuse to disclose the information requested.

For and in consideration of the City of Canfield's acceptance and processing of my application for employment, I agree to hold your organization, its agents and employees harmless from any and all claims and liability associated with my application for employment or in any way connected with the decision whether or not to employ me with the City of Canfield. I understand my rights under Title 5, United States Code, section 552a, the Privacy Act of 1974 and related Ohio Revised Code sections, with regard to access and to disclosure of records, and I waive those rights with the understanding that the information furnished will be used by the City of Canfield in conjunction with employment procedures.

A photocopy or FAX copy of this release form will be valid as an original thereof, even though the said photocopy or FAX copy does not contain an original writing of my signature.

This waiver is valid upon my signature during the time associated with the selection process of the City of Canfield.

I agree to indemnify and hold harmless the person to whom this request and his agents and employees, from and against all claims, damages, losses and expenses, including reasonable attorney's fees arising out of or by reason of complying with this request.

**The following information must be completed in the presence of a certified Notary Public:**

\_\_\_\_\_, having been duly sworn under oath states that this is his/her  
Name of Applicant/ Affiant

(Circle one) lawful affidavit and request for release of records.

\_\_\_\_\_  
Signature of Applicant

Sworn and subscribed before me, a Notary Public this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

**SEAL MUST BE AFFIXED**

\_\_\_\_\_  
Signature of Notary Public

\_\_\_\_\_  
Printed Name of Notary

\_\_\_\_\_  
Printed Address of Notary

(Out of state notary must submit Certificate)