D-1065(Ext)

City of Detroit 2014

Partnership Income Tax – Extension Request

or Fiscal Year Beginning ____ 2014, Ending ____

Federal Employer Identification Number

Partnership Name

Address (Number and Street or Rural Route)

City or Town | State | Zip Code

Reason for Extension:

If approved, this extension will be for 3 months. If you would like to request an additional 3 month extension (total 6 month extension) check here: ☐

1. Total estimated tax liability for 2014	1	.00
2. 2014 Estimated Payments	2	.00
3. If line 1 is larger than line 2 enter amount of tax due. (Make check payable to: Treasurer, City of Detroit)	3	.00

Under penalty of perjury, I declare that I have examined this return (including accompanying schedules and statements) and to the best of my knowledge and belief it is true, correct and complete. If prepared by a person other than taxpayer, the declaration is based on all information of which the preparer has any knowledge.

Signature of preparer other than taxpayer | Date

Partner's Signature | Date | Title

Address | I.D. number

MAILING INSTRUCTIONS: Due Date: This return is due April 30, 2015 or at the end of the fourth month after the close of your tax year.

Returns with Payments: **TREASURER, CITY OF DETROIT**
P.O. BOX 33406
Detroit, Michigan 48232

Refund and all others: **DETROIT CITY INCOME TAX**
P.O. BOX 33406
Detroit, Michigan 48232

For office use only.

Denied ☐

Reason: