

TOWN OF WAPPINGER

TOWN SUPERVISOR
Joseph D. Cavaccini



TOWN HALL
20 MIDDLEBUSH ROAD
WAPPINGERS FALLS, NY 12590

WWW.TOWNOFWAPPINGERNY.GOV
(845) 297-4158 - Main
(845) 297-2744 - Direct
(845) 297-4558 - Fax

OFFICE OF THE COMPTROLLER

IMPORTANT HEALTH COVERAGE TAX DOCUMENTS

Notice of Availability of Form 1095-C

This notice is to inform current and former employees of Town of Wappinger that **Form 1095-C, Employer-Provided Health Insurance Offer and Coverage, is available upon request** for tax year 2025 and forward.

Under new requirements set forth by the Paperwork Reduction Act, employers are no longer required to automatically mail paper copies of Form 1095-C. Instead, we provide this notice to inform you that the form is available if you need it.

Form 1095-Cs provide information about offers of coverage made to full-time employees and enrollees in self-insured coverage.

To request a copy of your Form 1095 or for further information about Form 1095-Cs, please contact us using one of the following methods:

Email: Megan Squarzini, msquarzini@townofwappingerny.gov

Phone: 845-297-0060

Mail: 20 Middlebush Rd Wappingers Falls, NY 12590

Requests can be made at any time, and the form will be provided to you by March 2, or within 30 days of your request, whichever is later.