

LOCAL EARNED INCOME TAX RESIDENCY CERTIFICATION FORM

TO EMPLOYERS/TAXPAYERS:

This form is to be used by employers and/or taxpayers to report essential information for the collection and distribution of Local Earned Income Taxes. This form must be utilized by employers when a new employee is hired or when a current employee notifies employer of a name and/or address change.

	LOYEE INFORMATION - RESID	ENCE LOCATIO	
NAME (Last, First, Middle Initial)			SOCIAL SECURITY NUMBER
FIRST LINE OF ADDRESS (If PO Box, please include	e actual street address)		
SECOND LINE OF ADDRESS			
CITY	STATE	ZIP CODE	DAYTIME PHONE NUMBER
MUNICIPALITY (Borough OR Township AND Schoo	District)		
COUNTY	PSD CODE		TOTAL RESIDENT EIT RATE
	OVER INCORMATION EMPLO	MARAT LOCATIO	ONL
	OYER INFORMATION - EMPLO	YMENT LOCATION	ON EMPLOYER FEIN
EMPLOYER NAME (Use Federal ID Name)			EMPLUYER FEIN
FIRST LINE OF ADDRESS ("If PO Box, please included by the control of the control	de actual street address)		
SECOND LINE OF ADDRESS			
CITY	STATE	ZIP CODE	PHONE NUMBER
MUNICIPALITY (City, Borough, Township)			
COUNTY	PSD CODE		MUNICIPAL NON-RESIDENT EIT RATE
SIGNATURE OF EMPLOYEE	CERTIFICATION		DATE
PHONE NUMBER	EMAIL ADDRES	EMAIL ADDRESS	
For information on obtaining the appropria	ite MUNICIPALITY (City, Borough, Tow	nship), PSD CODES	3 and EIT (Earned Income Tax) RATES
	nt of Community & Economic Develop		

www.newPA.com

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