

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.

EMPLOYEE INFORMATION - RESIDENCE LOCATION

NAME (Last, First, Middle Initial)			SOCIAL SECURITY NUMBER	
FIRST LINE OF ADDRESS (If PO Box, please include actual	street address)	*		
SECOND LINE OF ADDRESS				
CITY	STATE	ZIP CODE	DAYTIME PHONE NUMBER	
MUNICIPALITY (City, Borough, Township)				
COUNTY	PSD CODE		TOTAL RESIDENT EIT RATE	
EMPI OVER	INFORMATION - EMPL	OVMENT LOCATIO	O.N.	
EMPLOYER NAME (Use Federal ID Name)	IN ORMATION - EMPE	OTMENT LOCATION	EMPLOYER FEIN	
FIRST LINE OF ADDRESS ('If PO Box, please include 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	
	CERTIFICATION			
SIGNATURE OF EMPLOYEE			DATE	
PHONE NUMBER	EMAIL ADDR	EMAIL ADDRESS		
	-			

For information on obtaining the appropriate MUNICIPALITY (City, Borough, Township), PSD CODES and EIT (Earned Income Tax) RATES, please refer to the Pennsylvania Department of Community & Economic Development website:

www.newPA.com
Select Get Local Gov Support, >Municipal Statistics