

RESIDENCY CERTIFICATION FORM Local Earned Income Tax Withholding

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 to the local EIT collector. 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. Use the Address Search Application at www.newPA.com/Act32 to determine PSD codes, EIT rates and tax collector contact information.

MAME (Last Name, First Name, Middle Initial) STREET ADDRESS (No PO Box, RD or RR) ADDRESS LINE 2 CITY STATE ZIP CODE DAYTIME PHONE NUMBER MUNICIPALITY (City, Borough or Township) COUNTY RESIDENT PSD CODE TOTAL RESIDENT EIT RATE EMPLOYER BUSINESS NAME (Use Federal ID Name) Lancaster-Lebanon IU 13 STREET ADDRESS WHERE ABOVE EMPLOYEE REPORTS TO WORK (No PO Box, RD or RR) ADDRESS LINE 2 CITY STATE ZIP CODE TOTAL RESIDENT EIT RATE EMPLOYER BUSINESS NAME (Use Federal ID Name) Lancaster-Lebanon IU 13 STREET ADDRESS WHERE ABOVE EMPLOYEE REPORTS TO WORK (No PO Box, RD or RR) ADDRESS LINE 2 CITY STATE ZIP CODE PHONE NUMBER CERTIFICATION Under penalties of perjury, I (we) deadare that I (we) have examined this information, including all accompanying schedules and statements and to the best of my (our) belief, they are true, correct and compiler. PHONE NUMBER EMAIL ADDRESS EMAIL ADDRESS EMAIL ADDRESS	EMPLOYEE INFO	RMATION - RESIDE	NCE LOCATION	
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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/Act32