

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.

		, and the second	omployer of a name analog address change
EMPLOY	EE INFORMATION - RES	IDENCE LOCATION	N
NAME (Last, First, Middle Initial)			SOCIAL SECURITY NUMBER
			Commence of the approximation of the comment
FIRST LINE OF ADDRESS (If PO Box, please include actual	al street address)		
SECOND LINE OF ADDRESS			
Oltre		D.	
CITY	STATE	ZIP CODE	DAYTIME PHONE NUMBER
MUNICIPALITY (City, Borough, Township)			
COUNTY	PSD CODE		TOTAL RESIDENT EIT RATE
			AND EXTENSION AND PROPERTY OF THE
EMPI OVE	D INCODMATION - END	OVIII TO THE	
EMPLOYER NAME (Use Federal ID Name)	R INFORMATION - EMPL	OYMENT LOCATI	ON
J.F. Rohrbaugh Company, Inc			EMPLOYER FEIN
FIRST LINE OF ADDRESS (If PO Box, please include actua			23-1028530
1030 Wilson Avenue	al street address)		
SECOND LINE OF ADDRESS			
THE STANDARDO			
CITY			
Hanover	STATE	ZIP CODE	PHONE NUMBER
MUNICIPALITY (City, Borough, Township)	PA	17331	717-632-4353
Penn Township			
COUNTY			
York	PSD CODE		MUNICIPAL NON-RESIDENT EIT RATE
TOIR	6 7	1 0 0 2	
THE RESIDENCE OF THE PARTY OF T	CERTIFICATION		
SIGNATURE OF EMPLOYEE		NAME OF TAXABLE PARTY.	DATE.
			DATE
PHONE NUMBER	EMAIL ADDR	ECC	
	EMAIL ADDR	E55	
			*
Or information on obtaining the			
For information on obtaining the appropriate MUN	NICIPALITY (City, Borough, To	wnship), PSD CODES	and EIT (Earned Income Tax) RATES,
lease refer to the Pennsylvania Department of C	ommunity & Economic Development	opment website:	

www.newPA.com

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