

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.

EMPLO'	YEE INFORMATION - RESID	DENCE LOCATION	ON
NAME (Last Name, First Name, Middle Initial)			SOCIAL SECURITY NUMBER
STREET ADDRESS (No PO Box, RD or RR)			
ADDRESS LINE 2			
CITY	STATE	ZIP CODE	DAYTIME PHONE NUMBER
MUNICIPALITY (City, Borough or Township)			
COUNTY	PSI	D CODE	TOTAL RESIDENT EIT RATE RESIDEN
	ER INFORMATION – EMPLO	YMENT LOCAT	
EMPLOYER BUSINESS NAME (Use Federal ID Name)			EMPLOYER FEIN
STREET ADDRESS WHERE ABOVE EMPLOYEE REPO	ORTS TO WORK (No PO Box, RD or RR)		
ADDRESS LINE 2			
CITY	STATE	ZIP CODE	PHONE NUMBER
MUNICIPALITY (City, Borough or Township)			
COUNTY	WORK LOCATI	ON PSD CODE	WORK LOCATION NON-RESIDENT EIT RATE
	CERTIFICATION		
	(we) declare that I (we) have examined the ments and to the best of my (our) belief, the second seco		
SIGNATURE OF EMPLOYEE			DATE (MM/DD/YYYY)
PHONE NUMBER	EMAIL ADDRES	SS	
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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