

# LOCAL SERVICES TAX – EXEMPTION CERTIFICATE

Application for exemption for tax year: \_\_\_\_\_

- Submit a copy of completed application for exemption from the Local Services Tax (LST) and all necessary supporting documents to your employer and the Denver Borough office. (Most employers will forward form to the municipality on your behalf)
- This application for exemption from the LST must be signed and dated.
- **No exemption is effective until proper documentation has been received and approved.**

Name: \_\_\_\_\_ Last four numbers of Soc. Sec. #: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone #: \_\_\_\_\_  
City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

## REASON FOR EXEMPTION

1. \_\_\_\_\_ **MULTIPLE EMPLOYERS:** I am exempt from withholding based on paying a Local Service Tax (LST) pro rata per payroll to another, principal employer. I will notify employers of a change in principal place of employment within two weeks of the change. **(Attach a copy of a current pay statement from principal employer that shows the name of the employer, the length of the payroll period, and the amount of local service tax withheld. List all employers at the bottom of this form.)**
2. \_\_\_\_\_ **LOW INCOME EXEMPTION - \$12,000:** I expect my total earned income and net profits from all sources within **DENVER BOROUGH** will be less than \$12,000. **(Attach copies of last pay statements or W-2 for the prior year.)**  
**(SELF-EMPLOYED INDIVIDUALS: please attach a copy of your PA Schedule C, F, or RK-1 for the prior year.)**
3. \_\_\_\_\_ **ACTIVE DUTY MILITARY EXEMPTION:** I am exempt from tax because my occupation within the jurisdiction imposing the tax is active military duty. **(Attach a copy of orders directing active duty status. Annual training is not eligible for exemption.)**
4. \_\_\_\_\_ **MILITARY DISABILITY EXEMPTION:** I am exempt from tax based on military disability. (Attach a copy of discharge orders and a statement from the U.S. Veterans Administrator documenting disability. Only 100% permanent disabilities are recognized for exemption.)
5. \_\_\_\_\_ **PRIOR PAYMENT:** I have previously paid the full amount of the tax to the municipality and /or school district imposing the Local Service Tax, or have previously paid for this tax year \$52.00 as a local services tax based on an occupation within Pennsylvania (Attach evidence substantiating payment.)

**NOTE TO EMPLOYER:** Once you receive a properly completed certificate, you should promptly send a copy to Denver Borough. Unless you have reason to believe the certificate is inaccurate, you should not withhold the Local Service Tax for the portion of the calendar year for which the certificate applies, until otherwise instructed by the employee or the Borough office or until you have reason to conclude the tax withholding exemption no longer applies.

	1. Primary Employer	2. Second Employer	3. Third Employer
Employer Name			
Municipality			
Status (FT or PT)			

**I DECLARE UNDER PENALTY OF LAW THAT THE INFORMATION STATED ON AND ATTACHED TO THIS FORM IS TRUE AND CORRECT:**

**SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**Submit completed application and all necessary supporting documents to your employer and to the Denver Borough office.**  
(Check with your employer, most employers will forward the completed application to the municipality on your behalf with their quarterly tax return.)

**PLEASE NOTE:** All information received by the tax office is considered to be CONFIDENTIAL and is only used for official purposes relating to the collection, administration and enforcement of the LOCAL SERVICE TAX.

**Tax office:** Borough of Denver, 501 Main Street, Denver, PA 17517 Phone: 717-336-2831 Email: JHigh@denverboro.net

F: Forms/LST Exemption Certificate