

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 INFO	RMAT	ION - RESID	ENCE LO	CATION	
NAME (Last, First, Middle Initial)					SOCIAL SECURITY NUMBER
FIRST LINE OF ADDRESS (If PO Box, please include actual street add	fress)				
SECOND LINE OF ADDRESS	ALI	H H H	401 DIS	E H	
CITY	EGH	ELIZABI ELI X ABI	ZIP CODE TO O	ZABE	DAYTIME PHONE NUMBER
MUNICIPALITY (City, Borough, Township)	AN:	TH TH	H K	TH :	
COUNTY		WIN		FORWA	TOTAL RESIDENT EIT RATE
EMPLOYER INFO	MATI	H	ES OAD	ARD 6	
EMPLOYER NAME (Use Federal ID Name)	KIVIATI	UN - EMPLO	SUI	HOOL	EMPLOYER FEIN
FIRST LINE OF ADDRESS (If PO Box, please include actual street add	dress)		円 田		
SECOND LINE OF ADDRESS			2	STR	
CITY		STATE	ZIP CODE	HCH	PHONE NUMBER
MUNICIPALITY (City, Borough, Township)		PA	•		SCHO
COUNTY	2	PSD CODE			MUNICIPAL NON-RESIDENT EIT RATE
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	CER	TIFICATION			. 1
SIGNATURE OF EMPLOYEE	0	5037			DATE
PHONE NUMBER		EMAIL ADDRE	SS		,
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For information on obtaining the appropriate MUNICIPALI please refer to the Pennsylvania Department of Communi	ty&⊒Eco ⊢ Wayw.	Norough, Townsonomic Developed on the Noron North Nor	pment webs	18 897	d EIT (Earned Income Tax) RATES,
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