Catasauqua Area School District
201 N. 14th Street
Catasauqua, PA 18032

LOCAL SERVICES TAX – EXEMPTION CERTIFICATE

_____2026

APPLICATION FOR EXEMPTION FROM LOCAL SERVICE TAX

- A copy of this application for exemption from the Local Services Tax (LST), and all necessary supporting documents, must be completed and presented to your employer AND to the Catasauqua Area School District. You may also need to file a similar form with the local municipality.
- This application for exemption from the Local Services Tax must be signed and dated.
- **No exemption will be approved until proper documentation has been received.**

Name:_____ Soc. Sec. #_____
Address:_____ Phone #_____
City/State:_____ Zip:_____

Reason for Exemption

1. _____ **MULTIPLE EMPLOYERS:** Attach a copy of a current pay statement from your principal employer that shows the name of the employer, the length of the payroll period and the amount of Local Services Tax withheld. List all employers on the reverse side of this form. **You must notify your other employers of a change in principal place of employment within two weeks of the change.**

2. _____ **EXEMPTION FOR RESERVIST CALLED TO ACTIVE DUTY:** Please attach a copy of your orders directing you to active duty status. Annual training is not eligible for exemption. You are required to advise the tax office when you are discharged from active duty status.

3. _____ **MILITARY DISABILITY EXEMPTION:** please attach a copy of your discharge orders and a statement from the United States Veterans Administration or its successor declaring your disability to be a total one hundred percent service-connected permanently disability, or that you are blind, paraplegic, or a double or quadruple amputee as a result of military service.

EMPLOYER: Once you receive this Exemption Certificate, you shall not withhold the Catasauqua Area School District Local Services Tax (LST) for the portion of the calendar year for which this certificate applies, unless you are otherwise notified or instructed by the tax collector to withhold the tax.

Tax Office: Catasauqua Area School District
Address: 201 N. 14th Street **Phone #:** (610) 264-5571
City/State: Catasauqua, Pennsylvania **Zip Code:** 18032

Catasauqua Area School District does not provide an exemption based on income.

CASD Exemption 12-25

Employment Information: List all places of employment for the applicable tax year. Please list your PRIMARY EMPLOYER under #1 below and your secondary employers under the other columns. If self employed, write SELF under Employer Name column.

	1. PRIMARY EMPLOYER	2.	3.
Employer Name			
Address			
Address 2			
City, State Zip			
Municipality			
Phone			
Start Date			
End Date			
Status (FT or PT)			
Gross Earnings			

	4.	5.	6.
Employer Name			
Address			
Address 2			
City, State Zip			
Municipality			
Phone			
Start Date			
End Date			
Status (FT or PT)			
Gross Earnings			

PLEASE NOTE:

All information received by the Tax Collector is considered to be CONFIDENTIAL and is only used for official purposes relating to the collection, administration and enforcement of the LOCAL SERVICES TAX.

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

SIGNATURE: _____ **DATE:** _____