



## 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](http://www.newPA.com/Act32) to determine PSD codes, EIT rates and tax collector contact information.

#### EMPLOYEE INFORMATION – RESIDENCE LOCATION

|  |   |          |  |  |  |  |  |  |  |                         |  |  |
|--|---|----------|--|--|--|--|--|--|--|-------------------------|--|--|
| NAME (Last Name, First Name, Middle Initial) |   |          | SOCIAL SECURITY NUMBER<br><table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> </tr> </table> |  |  |  |  |  |  |                         |  |  |
|  |   |          |  |  |  |  |  |  |  |                         |  |  |
| STREET ADDRESS (No PO Box, RD or RR)         |   |          |  |  |  |  |  |  |  |                         |  |  |
| ADDRESS LINE 2                               |   |          |  |  |  |  |  |  |  |                         |  |  |
| CITY   | STATE   | ZIP CODE | DAYTIME PHONE NUMBER   |  |  |  |  |  |  |                         |  |  |
| MUNICIPALITY (City, Borough or Township)     |   |          |  |  |  |  |  |  |  |                         |  |  |
| COUNTY                                       | RESIDENT PSD CODE<br><table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> </tr> </table> |          |  |  |  |  |  |  |  | TOTAL RESIDENT EIT RATE |  |  |
|  |   |          |  |  |  |  |  |  |  |                         |  |  |

#### EMPLOYER INFORMATION – EMPLOYMENT LOCATION

|   |  |          |   |  |  |  |  |  |  |                                     |  |  |
|---|--|----------|---|--|--|--|--|--|--|-------------------------------------|--|--|
| EMPLOYER BUSINESS NAME (Use Federal ID Name)                              |  |          | EMPLOYER FEIN<br><table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> </tr> </table> |  |  |  |  |  |  |                                     |  |  |
|   |  |          |   |  |  |  |  |  |  |                                     |  |  |
| STREET ADDRESS WHERE ABOVE EMPLOYEE REPORTS TO WORK (No PO Box, RD or RR) |  |          |   |  |  |  |  |  |  |                                     |  |  |
| ADDRESS LINE 2  |  |          |   |  |  |  |  |  |  |                                     |  |  |
| CITY  | STATE  | ZIP CODE | PHONE NUMBER  |  |  |  |  |  |  |                                     |  |  |
| MUNICIPALITY (City, Borough or Township)                                  |  |          |   |  |  |  |  |  |  |                                     |  |  |
| COUNTY  | WORK LOCATION PSD CODE<br><table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> </tr> </table> |          |   |  |  |  |  |  |  | WORK LOCATION NON-RESIDENT EIT RATE |  |  |
|   |  |          |   |  |  |  |  |  |  |                                     |  |  |

#### CERTIFICATION

|   |                   |
|---|-------------------|
| Under penalties of perjury, I (we) declare that I (we) have examined this information, including all accompanying schedules and statements and to the best of my (our) belief, they are true, correct and complete. |                   |
| SIGNATURE OF EMPLOYEE   | DATE (MM/DD/YYYY) |
| PHONE NUMBER  | EMAIL ADDRESS     |

**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](http://www.newPA.com/Act32)**