

GIRARD SCHOOL DISTRICT/MUNICIPALITY

APPLICATION FOR **EXEMPTION OF OCCUPATION RESIDENT TAX**

July 1, ____ – June 30, ____

I hereby apply to the Girard Board of School Directors requesting that the tax collector be **exonerated** from collecting the Occupation Resident Tax levied against me. In support of this application, the following data is submitted:

1. NAME: _____
Last First MI
2. ADDRESS: _____
_____ PA 164 _____
3. SOCIAL SECURITY#: _____ - _____ - _____
4. DATE OF BIRTH: _____
5. TELEPHONE#: (814) _____
6. MARITAL STATUS: Single _____ Married _____ Widow _____ Widower _____
7. MY INCOME FOR _____
Wages and/or Salary : _____
Net profit from business, farming or profession : _____
Fees, Commissions, etc. : _____
Other Income : _____
TOTAL INCOME: _____
8. NAME OF MY EMPLOYER(s) _____
9. ADDRESS OF MY EMPLOYER(s) _____
10. LIVING SITUATION Own Home _____ Rent _____ Live with Relatives _____

I hereby certify that the above data is correct and complete. The income data is for the previous calendar year and the application for exemption is for the current fiscal year. The Girard School District Occupation Resident Tax is levied each fiscal year and an Application for Exemption must be completed and submitted for each year that I apply for exemption from the payment of the Occupation Resident Tax.

SIGNATURE: _____ DATE: _____

RETURN COMPLETED FORM TO:

BERKHEIMER
3608 West 26th Street
Suite 202
Erie, PA 16506