



RESIDENCY CERTIFICATION FORM

Local Earned Income Tax Withholding

PERSONNEL _____
 PAYROLL _____
 BENEFITS _____
 PSERS _____
 AESOP _____

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 INFORMATION - RESIDENCE LOCATION				
NAME (Last Name, First Name, Middle Initial)			SOCIAL SECURITY NUMBER	
STREET ADDRESS (No PO Box, RD or RR)				
SECOND LINE OF ADDRESS				
CITY	STATE	ZIP CODE	DAYTIME PHONE NUMBER	
MUNICIPALITY (City, Borough or Township)				
COUNTY	RESIDENT PSD CODE		TOTAL RESIDENT EIT RATE	

EMPLOYER INFORMATION - EMPLOYMENT LOCATION				
EMPLOYER BUSINESS NAME (Use Federal ID Name)			EMPLOYER FEIN	
SHALER AREA SCHOOL DISTRICT			2 5 1 2 1 1 8 0 7	
STREET ADDRESS WHERE ABOVE EMPLOYEE REPORTS TO WORK (No PO Box, RD or RR)				
1800 MT. ROYAL BLVD.				
SECOND LINE OF ADDRESS				
CITY	STATE	ZIP CODE	PHONE NUMBER	
GLENSHAW	PA	15116	412-492-1200	
MUNICIPALITY (City, Borough or Township)				
SHALER TOWNSHIP/SHALER AREA SCHOOL DISTRICT				
COUNTY	WORK LOCATION PSD CODE		WORK LOCATION NON-RESIDENT EIT RATE	
ALLEGHENY	7 1 1 2 0 4			

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