

# LOCAL SERVICES TAX – REFUND APPLICATION

Tax Year \_\_\_\_\_

- A copy of this application for a refund of the Local Services Tax (LST), and all necessary supporting documents, must be completed and presented to the tax office.
- This application for a refund of the Local Services Tax must be signed and dated.
- **No refund will be approved until proper document have been received.**

Name: \_\_\_\_\_ Soc Sec # \_\_\_\_\_  
Address: \_\_\_\_\_ Phone # \_\_\_\_\_  
City: \_\_\_\_\_ State/Zip: \_\_\_\_\_

## REASON FOR REFUND – CHECK ALL THAT APPLY

1. \_\_\_\_\_ I overpaid by more than \$1.00
2. \_\_\_\_\_ I had the tax withheld when it should have been exempted
3. \_\_\_\_\_ Multiple employers: Please 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 the Local Services Tax withheld. Please list all employers on the reverse side of this form.
4. \_\_\_\_\_ Total earned income and net profits from all sources within Mahoning Township was less than \_\_\_\_\_. Please attach a copy of all of your last pay statements from all employers with the political subdivision for the year prior to the fiscal year for which you are requesting to be exempted from the Local Services Tax. If you are self-employed, please attach a copy of your PA schedule C, F, or RK-1 for the year prior to the fiscal year for which you are requesting to receive a refund of the Local Services tax.
5. \_\_\_\_\_ Active Duty Military Exemption: Please attach a copy of your orders directing you to active duty status.
6. \_\_\_\_\_ Military Disability Exemption: Please attach a copy of your discharge orders and a statement from the United States Veterans Administrator or its successor declaring your disability to be a total 100% permanent disability.

Marlene M. Gunther  
Mahoning Township Tax Collector  
59 Steltz Road  
Danville PA 17821  
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F – 570-284-4634