

West Lebanon Township 322 North 22nd Street, Lebanon, PA. 17046 Phone # (717) 274-1598 Fax: (717) 274-5119

Local Service Tax

To:

West Lebanon Business'

From

West Lebanon Township

Subject:

Local Service Tax

Enclosed are forms that you should use to file your Local Services Taxes. Please make copies for each quarter. Only the form used to list employee's name, address and social security number may be substituted with a printout of your own as long as it contains all of the required information.

The Local Service Tax is \$52.00 per employee with earnings over \$12,000.00 and is collected at a rate of \$1.00 per week. Report and payment are due by the 30th of April, July, October, and January of each year.

For proper credit, the Local Services Tax form must accompany your payment. If you have any questions, please call Julie Clouse at 717-507-0257 or email to <u>Westlebanon@hotmail.com</u>.

Please mail checks to West Lebanon Township, 322 N 22nd Street, Lebanon PA 17046. Payments should be made payable to "West Lebanon Township".

Keystone Collection does **NOT** collect the Local Service Tax for West Lebanon, payments should not be sent to Keystone, they should be sent directly to West Lebanon Township.

Exemption forms can be found at https://dced.pa.gov/local-government/local-income-tax-information/

LOCAL SERVICES TAX

WEST LEBANON TOWNSHIP

	YEAR	Quarter	·	
TOTAL NU	IMBER OF E	EMPLOYEE'S REPORTED		
NUMBER OF WEEKS				
X \$1.00 PE	ER WEEK =	GROSS AMOUNT OF TAX		
# of exempt employee	s .			
Miscellaneous: explain				
TOTAL LS	T withheld fr	rom employees		
DAVABLE TO	MEGTLER	AANON TOWNSUID		
PAYABLE TO:		SANON TOWNSHIP		
	322 N. 22n			
	Lebanon, P			
	717-274-15	998		
Employer Name:				
Employer Address:			-	
City, State Zip			-	
Federal EIN:			-	
Phone:				
			-	
Authorized Signature				
Date:			-	
	REQUIRED	O INFORMATION		
Name of West Lebano	n Township	Business:		
			- 0	
Address of business in	n West Leba	non:		
Dhara #factorio	- \A/I T		-	
Phone # for business in WLT				

This form is required for all Local Service taxes submitted.

WEST LEBANON TOWNSHIP LST TAX FORM

EMPLOYER NAME:	

First Name	Last Name	Address, City, State, Zip	Social Security#	# of weeks worked	total amount of tax
			__	Worked	Tux
				_	
					-
				-	
				+	
				+	
-					
				+	
				+	