



Keystone Municipal Collections

118 Wendel Road
Irwin, PA 15642
(724) 978-0300 fax (724) 978-0339

**Emergency and Municipal Services Tax /
Occupation Privilege Tax
Claim For Refund**

Taxing District

Tax Year

Attach copy of pay stub or receipt and copy of PA-40 and W-2's.

Name of Applicant _____ Soc. Sec. No. _____

Address _____
No. and Street City State Zip

Check Status: Self-Employed Employee Employer

INSTRUCTIONS

Application must be signed and filed with Keystone Municipal Collections.
Attach proof of payment (copy of receipt or pay stub showing employer withholding.)
PA-40 and W-2's must be submitted when applying under #2 below.

*REFUND PROCESSING REQUIRES PROOF OF PAYMENT. ALLOW UP TO 90 DAYS FOR PROCESSING.

REASON FOR YOUR CLAIM

- Multiple deduction or payment:** Attach copy of pay stub or receipt from each employer.
- Did not reach minimum earnings for district in which tax was deducted:** List your total earnings from all sources of income within the calendar year, and identify the employer who deducted the tax from your wages. The tax year includes January 1 to December 31. Copy of pay stub or receipt, PA-40 and W-2's must be attached. (NO COPIES – NO REFUND)

I declare under the penalty of law that the information herein is true and correct.

Signature Date

\$ _____
Amount of Refund Request

FOR OFFICE USE ONLY

Refund Amount _____ Issued _____ Check _____ Key _____