



WEST MANHEIM TOWNSHIP

APPLICATION FOR PER CAPITA TAX EXEMPTION

FORM MUST BE COMPLETED IN EVERY DETAIL. This form is intended for ONE APPLICANT ONLY, and is to be returned to Tax Collector within your taxing district.

NAME: _____

LAST

FIRST

MIDDLE

ADDRESS: _____ **PHONE:** _____

_____ **EMAIL:** _____

AGE: _____ **DATE OF BIRTH (MM/DD/YYYY):** _____

I am applying to be exempt from the payment of the West Manheim Township Per Capita Tax for the year _____ because the following reasons apply:

_____ Full-time student under the age of 23 (PROVIDE COPY OF CURRENT STUDENT ID)

College: _____

_____ Active Military Service (PROVIDE COPY OF CURRENT MILITARY ID)

Branch: _____

Stationed: _____

_____ Individual whose total income from all sources is less than \$12,000 in the prior tax year

Attach a copy of the prior year's federal or state income tax return showing income from all sources

Income total: _____

I hereby affirm that the above information is true and correct and understand I may be subject to the penalties contained in the Pennsylvania Crimes Code.

West Manheim Township reserves the right to verify all information provided.

Signature: _____

Date: _____

THIS REQUEST MUST BE FILED EACH YEAR.

Please return to West Manheim Tax Office, 2412 Baltimore Pike, Suite 200, Hanover, PA 17331 no later than October 1st. The application will be submitted to the Board of Supervisors for approval.