

**WEST MANHEIM TOWNSHIP, YORK COUNTY, PENNSYLVANIA
REQUEST FOR EXONERATION FROM TOWNSHIP PER CAPITA TAX
FOR THE YEAR 20**

(Form must be filed no later than October 31st)

INSTRUCTIONS:

NOTE: 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 _____

WEST MANHEIM TOWNSHIP

AGE _____ DATE OF BIRTH _____ SEX _____
 Month Day Year

PHONE _____ SOCIAL SECURITY NO. _____

REASONS:

- A. Persons who were under 18 years of age on July 15 of tax year.
- B. SINGLE PERSONS whose total gross income from all sources amounts to \$5,000 or less during Tax year. **NOTE: List sources and amount below. THIS MUST BE COMPLETED.**

TOTAL INCOME _____

- C. MARRIED PERSONS whose joint gross income from all sources totals \$10,000 or less during tax year. Married persons must file separate exoneration requests. Income is to be added together to determine eligibility. **NOTE: List sources and amount below. THIS MUST BE COMPLETED.**

TOTAL INCOME FROM BELOW _____

- D. Persons who are MEMBERS OF THE ARMED FORCES OF THE UNITED STATES on active duty may be exonerated. It is also permissible for a spouse, parent, or guardian to execute this form for the above listed service personnel if they are not available to do so themselves.

Station _____ Branch of Service _____

Relationship to applicant executing this form for above Service personnel _____

- D. College: Enrolled in _____

Public Assistance	\$ _____	Annuities	\$ _____	Profits	\$ _____
Unemp. Compensation	\$ _____	Commissions	\$ _____	Bonuses	\$ _____
Self Employment	\$ _____	Rents (Net)	\$ _____	Pensions	\$ _____
Social Security	\$ _____	Salary/Wage	\$ _____	Royalties	\$ _____
Interest	\$ _____	Benefits	\$ _____	Other Income	_____
				(Explain)\$	_____
				\$ _____	TOTAL

THEREWITH AFFIRM THAT THE STATEMENTS GIVEN IN THIS APPLICATION ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

DATE _____

Signature of Applicant