

WASHINGTON TOWNSHIP/NORTHERN LEHIGH SCHOOL DISTRICT
LOCAL SERVICES TAX for Year _____

LOCAL SERVICES TAX
EMPLOYER'S RETURN
FORM #1

Payable to:
Washington Township LST
7951 Center Street
Emerald, PA 18080

1. Total number of employees reported _____
2. Gross amount of tax (line 1 x \$10.00/employee) _____
3. Employer's collection fee (line 2 x .02%) _____
4. Net Amount due (line 2 minus line 3) _____
5. TOTAL DUE TOWNSHIP _____

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

AUTHORIZED SIGNATURE

Date: _____

Business Name & Address

- | | | | |
|--------------|---|-------|-----------------------------|
| FOR QUARTERS | 1 | _____ | DUE ON OR BEFORE MAY 2 |
| | 2 | _____ | DUE ON OR BEFORE JULY 31 |
| | 3 | _____ | DUE ON OR BEFORE OCTOBER 31 |
| | 4 | _____ | DUE ON OR BEFORE JANUARY 31 |

INSTRUCTIONS TO EMPLOYER

1. The total number of employees reported here must agree with the total number of FORM LST #2 "Employee Deduction Certificates"
2. Forms must be filed on or before due dates as shown above.
3. **No collection fee will be allowed on returns filed late. After due date shown above**
4. In the event that you have no employees from whom you are required to deduct the tax, engaged in occupation within the Township of Washington in the period shown, write the word "NONE" on line #1, sign the return and return it to Washington Township, 7951 Center Street, Emerald, PA 18080
5. Please remit this original to the township and make copies for your records.

WASHINGTON TOWNSHIP/NORTHERN LEHIGH SCHOOL DISTRICT

LOCAL SERVICE TAX for Year _____ \$10.00

Complete LST Form #2 showing employee's name and correct home address

LOCAL SERVICE TAX
FORM LST #2

1. Send to Washington Township LST
7951 Center Street
Emerald, PA 18080
2. Give copy to employee, this is their
"Evidence of Deduction Certificate"
3. Make copy to retain for your records.
4. This form can be duplicated for additional employees

EMPLOYEE'S EVIDENCE OF
DEDUCTION CERTIFICATE

EMPLOYER'S NAME & ADDRESS

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