

Northeast Bradford School District - 526 Panther Lane; Rome, PA 18837

PETITION FOR EXEMPTION FROM SCHOOL DISTRICT PERSONAL TAXES

School district policy, in compliance with applicable state and local laws, allows the Board of Directors to grant an exemption from paying school district levied occupation and/or per capita taxes based upon criteria approved by the Board of Directors. Local tax exemptions are applicable to students, military service personnel, financial hardship cases (net annual income of \$4,500 or less), deceased, moved out of district or paid taxes elsewhere. Additional information is on the reverse side of this form. The exemption of payment is for the current tax year only. Petitioner will be notified within thirty (30) days if the exemption was denied. If you need assistance completing this form, please contact the district business office at (570)744-2521.

NAME:	TAX BILL NUMBER:
EMAIL:	PHONE NUMBER:
ADDRESS	TOWNSHIP/BOROUGH:

Please check all that apply and **provide supporting documentation as indicated.**

EXEMPTION REQUEST FROM OCCUPATION TAX – TAX YEAR:	(The following applies to Occupation Tax ONLY)
<input type="checkbox"/> CATEGORY CHANGE- REASON:	
Date of Change:	Tax Amount Before Change: Tax Amount After Change:
PLEASE PROVIDE PROOF OF CHANGE: For example-Retirement Letter, Letter from employer, Unemployment Paperwork, Social Security Paperwork, Tax Papers, etc.	
<input type="checkbox"/> LOW INCOME/Full-Time Student – Wages Earned: \$	
Annual combined net earned income shall be \$4,500 or less as shown on line 6 of the Earned Income Tax return for the applicable tax year. Please attach a copy of the prior year’s earned income tax return. IF NO EARNED INCOME, COMPLETE AFFIDAVIT ON REVERSE SIDE OF THIS FORM.	
EXEMPTION REQUEST FROM PER CAPITA – TAX YEAR:	(The following may apply to occupation as well as per capita)
<input type="checkbox"/> Moved from School District – Last day of residence in district _____ Provide proof of new address - phone bill, utility bill, paycheck stub, copy of lease or bank statement.	
<input type="checkbox"/> Non-Resident – Evidence of non-residency during the base period indicated and supported with at least two items of proof. Acceptable proof documents are: driver’s license or vehicle title with correct address for tax year, state income tax return, rent receipts or signed lease for the base period.	
<input type="checkbox"/> Hardship – Must be confined to his/her home, nursing home, hospital, or heat institution due to physical or mental illness.	
<input type="checkbox"/> Deceased – Copy of death certificate or knowledge by the tax collector of the deceased.	
<input type="checkbox"/> Duplicate Billing – List duplicate name and number from tax bill.	
Name:	Duplicate Tax Bill Number:
<input type="checkbox"/> Military Service – Active Military Service.	
Date of induction:	Branch: Unit:
<input type="checkbox"/> Paid Elsewhere – Partial-year residents attach a copy of the paid tax receipt for the same tax year from the district where paid.	
<input type="checkbox"/> Other Reason – Describe:	

CERTIFICATION

Under penalties of perjury, I affirm that I have provided the information in this petition, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. I understand that the Northeast Bradford School District may request additional information or clarification of items herein contained or referred to while considering this petition. I also understand that this exemption may be revoked by the Board of Directors and legal redress sought for back taxes, interest and penalties, and court costs should information on this form be found to be fraudulent or untrue. Moreover, I understand that any false statements made by myself in the completion of this form shall result in criminal charges being pursued by the Commonwealth of Pennsylvania and local government to the full extent of the law.

Petitioner’s Signature: _____ Date: _____

This application has been reviewed by me and conforms to the guidelines set forth in the policies established by the Board of Directors of the Northeast Bradford School District.

Business Office Signature: _____ Date: _____

AFFIDAVIT OF EARNED INCOME STATUS

I am requesting exemption from the payment of occupation taxes for the 20__ tax year. I depose and set forth that I have had no earned income for the prior calendar year and therefore, am unable to provide any proof of income on which to base this request.

I also understand that this statement will apply for this one year only.

Signature of taxpayer _____

Printed name of taxpayer _____

Above-

20__.

Sworn to and subscribed to before me by the
Names person this ____ day of _____,

Notary Public: _____
SEAL

INSTRUCTIONS

Petition for exemption must be made on the Northeast Bradford School District's Form "Petition for Exemption from School Personal Taxes" Form BO-007. Applications are available from the district business office.

1. An individual whose net earned income is \$4,500 or less for the PRIOR calendar year (current tax year less one year) and who meets all appropriate guidelines shall be exempt from paying the assessed occupation tax based on a combined net earned income only.
2. ALL QUESTIONS MUST BE ANSWERED **and** SUPPORTING DOCUMENTATION PROVIDED FOR THIS REQUEST TO BE CONSIDERED. If the question does not apply, write NONE or NOT APPLICABLE.
3. Each person in the household requesting exemption must complete a separate form.
4. Exemption or denial shall be effective **for one tax year only**.
5. All required supporting information must be provided with this form. Photocopies will not be accepted unless made at the district business office or notarized by a qualified, licensed public notary. Calculation of net income will be verified against earned income tax records for the prior calendar year being taxed. Proof of income must be attached to this form.
6. Category changes must be requested through the business office and will be forwarded to the Bradford County Assessment Office for inclusion in the next year's duplicate.
7. All exemptions granted will be a matter of public record.
8. Assessment base for residency and occupation tests is the current tax year January 1 through July 31.

BO-007 (3/2013)