

**SELF-EMPLOYED LOCAL SERVICES TAX FORM**

TAX YEAR \_\_\_\_\_ QUARTER \_\_\_\_\_

BERKS EIT BUREAU  
Phone: 610-372-8439/1-855-372-8439  
Fax: 610-372-1102

Municipality:  
School District:  
PSD:

1. TAX AMOUNT REMITTED	1
2. DISCOUNT, IF APPLICABLE	2
3. PENALTY	3
4. INTEREST	4
5. TOTAL DUE	5

Taxpayer Name: \_\_\_\_\_

\_\_\_\_\_ Social Security Number

Work location  
address: \_\_\_\_\_  
\_\_\_\_\_

**TAX RATE INFO:** Varies by municipality. Please refer to the Local Services Tax Rates.  
For tax rates greater than \$10.00 annually, you may elect to pay the tax in full or in quarterly installments.

**WHO IS TAXABLE:** All individuals who are self-employed or whose employer does not withhold the Local Services Tax must remit the tax directly to Berks EIT Bureau. The tax is levied at a rate determined by the municipality where you work or where your business is located.

**EXEMPTIONS:** If claiming exemption for the year, please return the completed Local Services Tax Exemption Certificate with this form.

ONCE COMPLETED, PLEASE MAIL THIS FORM AND YOUR CHECK, **MADE PAYABLE TO BERKS EIT BUREAU** TO:

BERKS EIT BUREAU  
1125 BERKSHIRE BLVD SUITE 115  
WYOMISSING PA 19610

I DECLARE UNDER PENALTY OF LAW THAT THIS INFORMATION IS CORRECT.

\_\_\_\_\_  
AUTHORIZED SIGNATURE DATE