

Southwest Regional Tax Bureau  
 One Centennial Way  
 Scottsdale PA 15683-1792  
 724-887-5320 724-834-5240  
 724-439-2312  
 FAX 724-887-7121  
 OFFICE HOURS: M-F 8 A.M. to 4 P.M.  
 Closed 11:30 A.M. to 12:30 P.M.

LOCAL SERVICE TAX  
 INDIVIDUAL REPORT

Name:  
 Address:  
 SS# (Account#): - - -1  
 Year:  
 Tax Rate: \$  
 PSDI:  
 School District:  
 Municipality:

Under penalties of perjury I declare that I examined this return including accompanying schedules and statements, and to the best of my knowledge and belief are true and correct.

Signature:

Date: Phone #:

Please Indicate Any Name or Address Change

FOR TAX OFFICE USE ONLY			
Tax Received:			
Interest:			
Penalty:			
Paid:			
Check	Cash	M.O.	

INSTRUCTIONS

1. Enclose Check or Money Order if filing by mail. If a receipt is required, return this form with stamped, self-addressed envelope with request.
2. If your payment is forwarded after the due date indicated on the front of this form, a \$2.00 Late Charge will be assessed.
3. This form must be filed even if there is no tax due. If tax is not due, indicate reason.