

**BOROUGH OF WEST MIFFLIN
LOCAL SERVICES TAX REFUND**

If for the calendar year your total earned income from all sources (employers and self-employment) in the municipality is less than \$12,000 you are entitled to a refund of the forty-seven dollars (\$47.00) Local Services Tax (LST) paid to the Borough of West Mifflin.

A total of fifty-two dollars (\$52.00) may have been taken out of your pay. Of this amount \$47.00 was paid to the Borough of West Mifflin and \$5.00 was paid to the West Mifflin Area School District

In order to receive your \$47.00 refund from the Borough you must provide the following to the Borough Administrative offices:

1. A signed copy of your Federal Tax Return
2. Copies of all W-2 statements for the year. (If you filed a joint return you must include all W-2's that will match the total earned income as entered on your Federal Tax return).
3. Completed Borough Of West Mifflin Local Services Tax Refund Form.
4. Proof that the Local Services Tax was paid to the Borough of West Mifflin. (Attach pay stub showing tax was withheld if amount is not included on the W-2.)

If there are several members of a family who are due a refund, an LST Refund Form must be completed for each individual. If the W-2's for all claiming a refund are included on one Federal tax return, then only one copy of the Federal tax return and all W-2's need be submitted.

Incomplete forms or missing information will delay the processing of your refund and may cause the information to be returned to you

All forms and information should be submitted to the following:

**Borough of West Mifflin
1020 Lebanon Road
West Mifflin, PA 15122**

**BOROUGH OF WEST MIFFLIN
LOCAL SERVICES TAX
REFUND FORM**

NAME: _____

ADDRESS: _____

LISTING OF EMPLOYERS FOR THE YEAR 20 ____ . (fill in year)

1. _____
2. _____
3. _____

USE ADDITIONAL SHEET OF PAPER IF MORE THAN 3 EMPLOYERS

HAVE YOU ATTACHED THE FOLLOWING INFORMATION:

- 1. SIGNED COPY OF YOUR FEDERAL TAX RETURN**
- 2. COPIES OF ALL W-2's**
- 3. PROOF THAT THE LST TAX WAS PAID TO THE
BOROUGH OF WEST MIFFLIN**

I the undersigned declare under penalty of law that the information contained on this form and any attachments to this form is true, full and complete to the best of my knowledge and belief and that my total earned income from all sources in the Borough of West Mifflin for the year was \$12,000 or less.

Signature Date

PHONE # _____

Borough Use Only

Approved: _____ **Amount:** _____ **Check #** _____