

RIDGWAY AREA SCHOOL DISTRICT EXONERATION REQUEST

For Occupation and Per Capita Taxes for 2020

****All questions must be answered for application to be considered**

DUE - DECEMBER 22, 2020

Select :

- Ridgway Borough Horton Township
- Ridgway Township Spring Creek Township

Bill No. or Tax Notice Number: _____

***Include Tax Bill**

NAME: _____ Birth Date: _____ Age: _____

ADDRESS: _____, _____

Select reason for exoneration:

This section MUST be completed

- Hardship
- Full Time Student
- Military
- Income Less than \$5,000
- Married - Income less than \$10,000

Date Hardship Began: _____

Nature of Hardship: _____

College currently attending: _____

Branch of Service: _____

Income:

Are you presently employed full or part time Yes No Full Time Part Time

Were you employed anywhere during the last year Yes No

Company/Employer Name: _____ Company/Employer Name: _____

Address: _____ Address: _____

Income from occupation for the calendar year January 1, 2019 through December 30, 2019 \$ _____

All other income sources (i.e. interest, pensions, unemployment, social security) \$ _____

TOTAL INCOME \$ _____

I request the Ridgway Area School Board to exempt/adjust my Occupation/Per capita Taxes in the amount of (Face Value) \$ _____ for the year _____ and agree to notify the board should there be any change in the data submitted on this request.

I declare that I have TOTAL INCOME FOR ALL SOURCES of less than \$5,000 a year filing single or \$10,000 filing jointly. I also understand that I must report any changes in employment to the Ridgway Area School District. Income limits do not apply in cases of hardship, student or military exemptions.

I further understand that all information CAN BE VERIFIED by the school district or its appointed tax service agency and where the applicants no longer qualified for exemption, the applicant will be responsible for all the penalties, and costs on taxes for which an exemption was granted.

I verify all statements made in this request are true and correct. I understand that false statements herein are made subject to the penalties of 18PA C.S. Section 4904, relating to unsworn falsification to authorities.

Signature: _____ Date: _____

SUBMIT THIS FORM ON OR BEFORE: December 22, 2020 Be sure to include tax bill and a stamped self addressed envelope with your form.

MAIL TO: Ridgway Area School District, Attn: Board Secretary, 62 School Drive, Ridgway, PA 15853

Only forms submitted with a stamped return envelope will receive notification of the action of the school board after their September 08, 2020 meeting. Tax collectors do receive notification of all exonerations, exemption or adjustments.