BOROUGH OF FOREST HILLS

4400 Greensburg Pike PITTSBURGH, PA 15221 (412) 351-7330



LOCAL SERVICES TAX REFUND REQUEST

	s: Please complete the form below a of the year following the collection of	and submit to the borough office NO LATER THAN the tax along with:
	A copy of your W2 Form(s) or (if se	elf employed only) Schedule C of 1040 form
	A copy of the pay stub showing that	t the \$52 tax was deducted from your paycheck OR
	A copy of your cancelled check sho	wing payment of the \$52 tax (if self employed only)
or if su	bmitted without the above requested	ived after April 15 or if any part of the form is incomplete documents. Refunds are paid only if your total salary is 12,000 or higher). No refunds of amounts less than \$1.
Name/Add	lress of Employer (please print):	
		Please check box below if you are self employed:
		Self Employed (include your social security number below)
Print Nam	ne:	Social Security Number:
Address:		City:
State:	Zip:	Phone Number:
	under penalties provided by law that this ect and complete request.	refund request is to the best of my knowledge and belief a
Signature):	Date:
Refur		veeks of the date that this form is submitted along with the supporting documents.
	O:	ffice Use Only

Approved: _____ Date: ____ Check Number/Date: _____