

Capital Tax Collection Bureau

www.captax.com

Huntingdon County Office

(814) 473-3111 Phone
(814) 473-3113 Fax

Perry County Office

506 S State Rd
Marysville PA 17053-1001
(717) 957-7281 Phone
(717) 957-7295 Fax

Somerset County Office

(814) 701-2475 Phone
(814) 701-2318 Fax

SHANKSVILLE-STONYCREEK SCHOOL DISTRICT

APPLICATION FOR PER CAPITA TAX EXEMPTION REQUEST

Applicant's Name: _____

Date _____

Bill # (required) _____

Mailing Address: _____

Resident of : Indian Lake Borough Shanksville Borough Stonycreek Township

I am applying to be placed on the list of taxpayers exempted from payment of the **Shanksville-Stonycreek School District Per Capita Tax** for the year _____ because one or more of the following reasons apply:

_____ Over age 75 (must provide birthdate) _____

_____ Student under the age of 21 years, or have not yet attained your first college degree, whichever comes first (must provide birthdate) _____

_____ Permanently Disabled (100%) * Must have a Physicians statement stating your disability.

_____ Military Service

By completion of this application, I hereby state that the above facts are true and correct, and that I understand I may be subject to the penalties contained in the Pennsylvania Crimes Code for un-sworn falsifications to legal authorities if any of the above statements are incorrect.

Date of Application

Signature of Applicant