

**DO NOT RETURN THIS FORM TO  
THE TAX COLLECTOR**

**SCHOOL PER CAPITA  
TAX EXONERATION  
REQUEST**

Due Date: September 30, 2016

**RETURN TO:**  
BUTLER AREA SCHOOL DISTRICT  
110 Campus Lane  
Butler, PA 16001  
Attn: Business Office

724-214-3104

Fall Tax Notice for 2016

**SECTION I - ADDRESS**

1. NAME \_\_\_\_\_ DATE: \_\_\_\_\_
2. D/M/P: (On left of your tax bill) \_\_\_\_\_
3. PERMANENT ADDRESS \_\_\_\_\_
4. TAXING DISTRICT:     Butler Township     Center Township     City of Butler     Clearfield Township
- Connoquenessing Borough     Connoquenessing Township     East Butler Borough     Oakland Township     Summit Township

**SECTION II - INCOME**

4. ARE YOU EMPLOYED?     YES     NO
- 4a. ARE YOU RECEIVING SOCIAL SECURITY OR PUBLIC ASSISTANCE?     YES     NO    If yes, list monthly amount \$ \_\_\_\_\_
- 4b. TOTAL YEARLY INCOME FROM ALL SOURCES: \$ \_\_\_\_\_



**IF YOU EARNED \$10,000 OR MORE DURING 2015. YOU DO NOT QUALIFY FOR EXEMPTION.**

A COPY OF YOUR MOST CURRENT W2(S) MAY BE REQUESTED.

(If you earned less than \$10,000, please proceed to Section III)

**SECTION III - (In addition to income requirements, you must also satisfy at least ONE of the following)**

5. REASON FOR EXONERATION (Please check all that apply)
- 65 YEARS OF AGE
  - MENTALLY HANDICAPPED
  - LIVING IN NURSING HOME
  - PHYSICALLY DISABLED AND UNABLE TO WORK (Please list disability below)
  - ACTIVE IN MILITARY SERVICE
  - WIDOW OR WIDOWER OVER 50 YEARS OF AGE
  - FULL-TIME STUDENT - SCHOOL ATTENDING \_\_\_\_\_

DESCRIPTION OF HANDICAP OR DISABILITY (IF APPLICABLE) \_\_\_\_\_

I hereby declare that all statements made in this request are true and correct to the best of my knowledge, I have read and understand that "false" statements made herein are subject to penalties of the 18 PA. C.S.A. Section 4904, relating to unsworn falsification to authorities and is grounds for prosecution. The School District reserves the right to independently verify all statements made herein.

DATE \_\_\_\_\_ APPLICANT SIGNATURE \_\_\_\_\_

FOR OFFICIAL USE ONLY - DO NOT WRITE BELOW THIS LINE

APPLICATION APPROVED \_\_\_\_\_ APPLICATION DISAPPROVED \_\_\_\_\_ SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

FREQUENTLY ASKED QUESTIONS:

1. **Where and how do I pay this bill?** You may pay by mail or in our office. Make checks payable to William Helsel, Tax Collector. Our office is located in the Butler Township municipal building at Duffy and Whitestown Roads. Our public office hours and mailing address are listed on the left side of the tax bill. Be sure to submit the bill with your payment. By LAW, we must have the bill to process your payment, or a duplicate bill fee applies. Therefore, we cannot process payments issued by online bill payers.
2. **What are these taxes, "ACT 511 PC" and "ACT 679 PC", on this bill?** These are flat-rate (\$5.00), "per capita" or "head tax" taxes, levied on all residents of Butler Area School District 18 years of age and older. This is not a tax on real estate. The Law permits Butler Area School District to use a real estate tax bill to bill you. Property owners have this tax included on their real estate tax bills and are not billed separately. The tax is used for general purposes of Butler Area School District and is not for a particular purpose or use. The tax has no connection with employment, income, voting rights or any other factor except residence within the community.
3. **How do I apply for exoneration?** Use the form on the reverse side, or obtain a form from the receptionist at the Butler Area School District administration building, c/o Business Office, 110 Campus Lane, Butler, PA 16001 (724-214-3104). Complete, sign and return the form to the Butler Area School District receptionist or return to the Butler Area School District by mail. Parents of full-time students may complete and sign exoneration requests for their children. **DO NOT RETURN THE EXONERATION REQUEST TO THE TAX COLLECTOR.**
4. **What is the deadline to file an exoneration form?** September 30 of the current tax year is the deadline for filing.
5. **Will I be notified when my exoneration is approved?** No. Your exoneration request will be returned to you with explanation of denial if, and only if, your request for exoneration is not granted.
6. **I am billed by another school district for this tax. Why?** You should only pay per capita tax in the school district in which you are a resident at the time of the tax levy (July 1). The other tax might not be a per capita tax or it could be an error. Notify in writing and signed, the tax collector in the school district in which you are not a resident as of July 1 of the tax year. Enclose a stamped "paid" receipt of the other per capita tax bill, for where you were a resident on July 1.
7. **I own property in Butler Area School District and the LOCAL PC is being charged on the real estate tax bill too. Do I have to pay twice?** No. Notify the tax collector in writing and the tax rolls will be adjusted as necessary. Your per capita tax should be billed to the address at which you are a resident.

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**CHANGE OF ADDRESS:**

**D/M/P (on left of your tax bill)** \_\_\_\_\_

**Name (print)** \_\_\_\_\_ **Signature:** \_\_\_\_\_

**New Address:** \_\_\_\_\_

**Date of Move** \_\_\_\_\_ *(if prior to July of this year, and you are no longer a Butler Area School District resident you will not need to pay school per capita tax for 2016)*

**If not paying the tax, return this form to: Butler Area School District, Attn: Business Office, 110 Campus Lane, Butler, PA 16001.**

**If paying the tax, return this form with payment and tax bill to Tax Collector, P O Box 385, Lyndora 16045**

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**TAXPAYER IS DECEASED:**

**D/M/P (on left of tax bill)** \_\_\_\_\_

**Name of Taxpayer (print)** \_\_\_\_\_

**Date of Death:** \_\_\_\_\_ *(if prior to July this year, school per capita tax for 2016 will not need to be paid)*

**Signature of person submitting this form** \_\_\_\_\_

**Print name of person submitting this form** \_\_\_\_\_

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