

BOROUGH OF PALMYRA
Application for Exoneration of Per Capita Taxes

1. Name and Address:

2. Employer's Name:

3. Age, if applying for the age exoneration:

4. List total income from all sources:

Income Source	Amount of Income
Salary or Wages	
Pension	
Social Security	
Income from Property	
Interest, Dividends	
Inheritance	
Other	
Total Income	

5. What tax year are you requesting exoneration from this application?

I, hereby certify that the information provided above is true and correct.

Signature of Applicant

Applicants may be required to furnish additional information to clarify, verify or add to this application. Applicant must furnish a copy of their federal income tax return.

Approved: _____ Date: _____