



TOWNSHIP OF WHITEHALL

3221 MACARTHUR ROAD, WHITEHALL, PA 18052



PETITION FOR APPEAL AND REFUND

INSTRUCTIONS: This form is to be used by taxpayers appealing an assessment of tax by the Treasurer or his/her agent. Please complete the Petition in ink or typed. Attach a copy of the Assessment Notice being appealed, or if seeking a refund, proof that such tax was paid. Mail the completed Petition to Whitehall Township Treasurer, 3221 MacArthur Road, Whitehall, PA. Petitions appealing an Assessment Notice must be received by the Treasurer within ninety (90) days of the date of the Assessment Notice. Petitions for refunds must be received by the Treasurer within the later date of:

- A. Three (3) years of the date due for filing the return or
- B. One (1) year after actual payment of the tax.

Refund claims filed through the US Postal Service are considered filed as of the postmark date. Petitions filed through any other method are considered filed on the date received.

Answer all questions below as fully as possible. If an item is not applicable, enter N/A.

SECTION A: TAXPAYER INFORMATION

Last name	First Name	Middle Initial

Street Address	Whitehall	PA 18052

Phone Number	Email	Fax

Previous Street Address	City	State/Zip

Social Security #	Account #	Tax Payer ID #

Business D/B/A	Name	Location

SECTION B: TAX INFORMATION

Type of Tax	Is this Petition for a Refund YES or NO	Tax Year

Period:	Amount of Requested Refund	Assessment Notice Mailing Date



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SECTION C: REPRESENTATIVE INFORMATION (Complete Information for Representative (if applicable))

Send all copies of correspondence to:	Representative	Appellant
Last Name	First Name	Middle Initial

Representative is:	Attorney	Other Tax Advisor
Circle One	Certified Public Accountant	Other Accountant

Business Name	Street Address	City, State, County, Zip
Phone #	Fax #	Email:

SECTION D: RELIEF REQUESTED AND ARGUMENTS: Explain Relief Requested -

Explain in detail why the relief above should be granted. Attach additional pages if necessary. Enclose copies of any documents you feel will support your argument. Petitions for refunds must be accompanied by proof of payment of the tax:



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SECTION E: SIGNATURE

All Petitions must be signed by Petitioner or an authorized representative. If signed by an authorized representative, written authorization for the representative to sign on Petitioner's behalf must accompany the Petition.

Under penalties prescribed by law, I hereby certify that this Petition has been examined by me and that to the best of my knowledge, information and belief, the facts contained in the Petition are true and correct.

SIGNATURE		Date:
Print Name		Taxpayer or authorized representative
Title:		Date:

OFFICIAL USE ONLY

SECTION F: RESULTS OF THE PETITION

SIGNATURE: _____ DATE: _____

ACCEPTED: _____ **REJECTED:** _____

Legal opinion and decision must be attached.