

**NOTICE OF INTENT TO FILE COMBINED RETURNS
AND MAKE COMBINED PAYMENTS**

DATE: _____

TO: _____

FROM: EMPLOYER NAME _____

FED ID# _____

CORPORATE ADDRESS _____

***PSD OF BUSINESS LOCATION WHERE EMPLOYER'S PAYROLL OPERATIONS ARE LOCATED (IF IN STATE) OR
BUSINESS LOCATION WHERE EMPLOYER IS FILING MONTHLY (IF PAYROLL OPERATIONS ARE OUT OF STATE).***

PSD Name: _____

PSD Code: _____

Please be advised that _____, is hereby filing this Notice of Intent to File Combined Returns and Payments of the Local Earned Income Tax withheld from all employees who are employed in the Commonwealth of Pennsylvania with BERKHEIMER TAX ADMINISTRATOR, 50 NORTH SEVENTH STREET, BANGOR, PA 18013, Tax Officer for the _____ County Tax Collection District, effective _____.

As part of this decision, EMPLOYER understands and commits to the following requirements:

1. EMPLOYER shall deduct the correct tax rate for each employee who is employed in any of the EMPLOYER'S Pennsylvania work locations from their wages. The tax rate to be withheld will be the greater of the employee's **resident** tax or the **non-resident** rate of the employee's work location, as reflected in the official register maintained by the Pennsylvania Department of Community and Economic Development.
2. Within thirty (30) days of the end of each month, EMPLOYER shall file a return and pay the amount of income taxes deducted during the preceding calendar month from all employees employed within the Commonwealth of Pennsylvania.
3. The return must be filed and paid electronically through our e-file portal and must include the Social Security number, name, address, wages paid, tax withheld, and resident PSD code for each employee. Also included on the return shall be all necessary Employer information including Federal ID Number, Name, Address and PSD in which business is located. EMPLOYER agrees to submit their electronic file using one of the following filing formats: CSV File Format, Federal File Format, or the Pennsylvania Standard File Format.

4. This Notice of Intent to File Combined Returns and Make Combined Payments shall not be construed to change the location of an employee's place of employment for purpose of the employee's non-resident tax liability.
5. On or before February 28th of the succeeding year, EMPLOYER shall file the following with Berkheimer Tax Administrator for the period of January 1st of the current year and ending December 31 of the current year:
 - a. An Annual W2 Reconciliation electronically thru our e-file portal on the web, showing the total amount of compensation paid to each employee, the total amount of income tax withheld for each employee, and the total amount of tax paid to Berkheimer Tax Administrator.
 - b. An electronic individual withholding statement (Form W2), for each employee employed for all or any part of the period, providing the address, social security number, total compensation paid, total amount of tax deducted and the numerical TCD code representing the Tax Collection District in which payments of deducted tax have been remitted in the locality box.
6. If EMPLOYER discontinues business prior to December 31st of the current year, EMPLOYER shall, within thirty (30) days after the discontinuance of business, electronically file the returns and withholding statements required above and electronically pay the income tax due at the time of filing the final returns.
7. Employer must provide Berkheimer with a list of addresses and PSD codes for each of the business locations in Pennsylvania to be included in the Consolidated File.

Signature of Responsible Person: _____

Name of Responsible Person/Contact: _____

Contact Phone #: _____ **Email:** _____

Address: _____

PLEASE NOTE: YOU ARE REQUIRED TO SEEK APPROVAL FROM BERKHEIMER TO FILE A COMBINED RETURN WITH BERKHEIMER PRIOR TO NOTIFYING ANY OTHER COUNTY TAX OFFICERS OF YOUR DECISION TO UTILIZE THIS OPTION.

Email Form	Print Form
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