

SECTION B: TAX INFORMATION:

Type of Tax

Is this Petition for a Refund? If so, in what amount?

Tax Year(s): Quarter(s):

Date of Notice of Assessment:

SECTION C: TAX REPRESENTATIVE INFORMATION

COMPLETE INFORMATION FOR REPRESENTATIVE (if applicable)

I hereby nominate the following as my representative:

Last Name First Name Middle Initial

Is Representative an: Attorney Certified Public Accountant
 Other Accountant Other Tax Advisor

Business Name: _____

Street Address: _____

City State Zip Code

I would like copies of all correspondence sent to my representative.

SECTION D: HEARING REQUEST

- Hearing Requested. (Check if Taxpayer desires a hearing in person.)
- Hearing is **NOT** Requested. The Decision in this matter will be based on the information contained in this Petition and on the Record provided by the City and the York Area Tax Bureau. No hearing will be scheduled. (if choice is not indicated, hearing will be conducted based on the Petition and Record without a hearing in person.)

SECTION E: RELIEF REQUESTED & ARGUMENTS

Explain the relief requested:

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

SECTION F: SIGNATURE

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

Under penalties prescribed by the 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 and this Petition is not filed for purposes of delay.

Signature: _____
(Taxpayer or Authorized Representative)

Print Name: _____

Dated: _____