

BOROUGH OF DRAVOSBURG

I am applying for exoneration from paying Per Capita Tax. I certify that I am:

_____ Unemployed and over 62 years of age

_____ I am under 18 years of age

Name: _____

Address: _____

Date of Birth: _____

I retired from: _____

Date of Retirement: _____

Signature of Applicant

Date

****PLEASE NOTE: FORM MUST BE SUBMITTED WITH PROOF OF AGE**