

COMMONWEALTH OF PENNSYLVANIA DEPARTMENT OF REVENUE BUREAU OF INDIVIDUAL TAXES PO BOX 280603 HARRISBURG PA 17128-0603

APPLICATION FOR REFUND PENNSYLVANIA REALTY TRANSFER TAX

OFFICIAL USE ONL	
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REFUND INSTRUCTIONS – This application must be filed within three (3) years from date paid and include the following:

- 1. A copy of the applicable deed, with a legible tax stamp.
- 2. Evidence to show who paid the tax (copy of cancelled check, settlement sheet, etc.).
- 3. Documentation to support any overpayment claimed.
- 4. Complete explanation for overpayment below.

NAME	Т	ELEPHONE NUMBER
		()
STREET ADDRESS C	TY S	STATE ZIP CODE
☐ Make refund payable and mail to the representative	: Representative's SSN or EIN*	
☐ Make refund payable to applicant(s) checked below		
☐ Make refund payable and mail to applicant(s) check		
☐ APPLICANT-GRANTOR	☐ APPLICANT-GRANT	EE
NAME(S)	NAME(S)	
STREET ADDRESS	STREET ADDRESS	
CITY STATE ZIP CODE	CITY	STATE ZIP CODE
SSN or EIN*	SSN or EIN*	
* Refunds cannot be issued without the SS	N or EIN of the party to whom the refu	und is payable.
AMOUNT OF STATE TAX PAID \$	(1	Do <u>not</u> include local tax)
STATE TAX DUE		
AMOUNT OF REFUND REQUESTED \$4	(\$	See note below)
NOTE: Interest will be calculated and paid on the overpayment of the	ax based on the current rates establish	ned by the PA Department of Revenue.
EXPLANATION FOR OVERPAYMENT (Attach addition	nal sheets if necessary):	
SIGNATURE OF APPLICANT OR REPRESENTATI	/F IS REQUIRED	
O.O. W. ORE OF ALL EIGHT ON REI REGENTALI	LIO REGUILED	
SIGNATURE	DATE	
MAIL COMPLETED APPLICATION AND DOCUME		

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