STATE OF NEW JERSEY Department of the Treasury Division of Taxation PO Box 269 Trenton, NJ 08695-0269

Employee's Certificate of Nonresidence In New Jersey

Print or Type				
First Name	MI	Last Name		Social Security Number
Street Address				
City			State	ZIP Code
		Pennsylvania Reside		
I hereby declare, under penalties of perjury, that I am a resident of the State of Pennsylvania and that, pursuant to a reciprocal agreement existing between that State and the State of New Jersey, I claim exemption from withholding of New Jersey Gross Income Tax on compensation paid to me in the State of New Jersey and authorize my employer to withhold Pennsylvania personal income taxes on my behalf.				
Note: If you change your resi	dence from Pennsylv	/ania to any other state,	you must notify you	r employer within 10 days.
Date		Signature		
		Military Spouses		
	ome Tax on your wag	ges if you reside in New J	Jersey but have cho	dency Relief Act, you may be esen a state other than New Jersey al military identification card to
I certify that I am not subject t as amended by the Military S			ons set forth under t	the Servicemember Civil Relief Act
Date		Signature		

New Jersey Employer

You are required to have a copy of this form on file for each employee receiving compensation paid in New Jersey and who is a resident of Pennsylvania and claims exemption from withholding of New Jersey Gross Income Tax under the reciprocal agreement between New Jersey and Pennsylvania or who claims exemption from withholding of New Jersey Gross Income Tax under the Servicemember Civil Relief Act, as amended by the Military Spouses Residency Relief Act. **Do not forward this Form to the Division of Taxation.**

This Form May Be Reproduced

Do Not Forward This Form To The Division of Taxation