

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

**EMPLOYEE'S CERTIFICATE OF NON-RESIDENCE IN NEW JERSEY**  
(To Be Used By Pennsylvania Residents only)

*Print or Type*

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First Name	MI	Last Name	Social Security No.
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Street Address

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City	State	Zip Code
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**Note:** If you change your residence from Pennsylvania to any other state, *you must notify* your employer within 10 days.

I hereby declare, under penalties of perjury, that I am a resident of the State of Pennsylvania and that, pursuant to an 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.

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(Date)

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(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 entered into between New Jersey and Pennsylvania.

**MAY BE REPRODUCED**