

LST-1 **TOWNSHIP OF FALLS**
 450 Lincoln Hwy.
 Fairless Hills, Pennsylvania 19030
LOCAL SERVICES TAX
FORM LST-1 EMPLOYER'S RETURN
 2024
 (215) 949-9000 • www.fallstwp.com

MAKE CHECK PAYABLE TO TOWNSHIP OF FALLS
 I DECLARE UNDER PENALTY OF LAW THAT THE INFORMATION HEREIN CONTAINED IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

AUTHORIZED SIGNATURE _____

PHONE # _____

DATE _____ TITLE _____

For proper credit (As Listed in the Township)

EMPLOYERS NAME AND ADDRESS
 REMINDER - BE SURE YOUR RETURN IS SIGNED AND PAYMENT IS ENCLOSED.
 WHITE - TOWNSHIP CANARY - EMPLOYER

FAILURE TO FILE A RETURN ON EACH DUE DATE MAY RESULT IN LEGAL ACTION.

SEE INSTRUCTIONS ON REVERSE.

1. TOTAL NUMBER OF EMPLOYEES HEREWITH. (INCLUDE OWNERS AND MANAGERS)	
2. GROSS AMOUNT OF TAX FROM EMPLOYEE LISTING	
3. EMPLOYER'S COLLECTION FEE (LINE 2 X .02) IF PAID BY DUE DATE (LINE 2 MINUS LINE 3)	
4. NET AMOUNT DUE ENCLOSED	
5. PENALTY (10%) AFTER 4/30/24	
6. INTEREST 1/2 OF 1% PER MONTH	
7. TOTAL INCLUDING ANY PENALTY & INTEREST	\$

**For Persons Employed
 From Jan. 1 to March 31
 Please pay by April 30, 2024**

EFFECTIVE 1/1/2018 THE LST IS \$52/YEAR

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3. EMPLOYER'S COLLECTION FEE (LINE 2 X .02) IF PAID BY DUE DATE (LINE 2 MINUS LINE 3)	
4. NET AMOUNT DUE ENCLOSED	
5. PENALTY (10%) AFTER 7/31/24	
6. INTEREST 1/2 OF 1% PER MONTH	
7. TOTAL INCLUDING ANY PENALTY & INTEREST	\$

**For Persons Employed
 From April 1 to June 30
 Please pay by July 31, 2024**

EFFECTIVE 1/1/2018 THE LST IS \$52/YEAR

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3. EMPLOYER'S COLLECTION FEE (LINE 2 X .02) IF PAID BY DUE DATE (LINE 2 MINUS LINE 3)	
4. NET AMOUNT DUE ENCLOSED	
5. PENALTY (10%) AFTER 10/31/24	
6. INTEREST 1/2 OF 1% PER MONTH	
7. TOTAL INCLUDING ANY PENALTY & INTEREST	\$

**For Persons Employed
 From July 1 to Sept. 30
 Please pay by Oct. 31, 2024**

EFFECTIVE 1/1/2018 THE LST IS \$52/YEAR

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5. PENALTY (10%) AFTER 1/31/25	
6. INTEREST 1/2 OF 1% PER MONTH	
7. TOTAL INCLUDING ANY PENALTY & INTEREST	\$

**For Persons Employed
 From Oct. 1 to Dec. 31
 Please pay by Jan. 31, 2025**

EFFECTIVE 1/1/2018 THE LST IS \$52/YEAR

INSTRUCTIONS TO EMPLOYER

1. Provide a list on Company letterhead, which consists of Employee Name, Social Security Number, and dollar amount withheld. Sign the LST-1 form and return with payment and copy of employee listing to Township of Falls, 450 Lincoln Highway, Fairless Hills, PA 19030.
2. Pro-rated LST levy withheld per full-time employee should equal \$13.00 per quarter for a total of \$52.00 per person per calendar year.
3. In the event a new full-time employee is hired during the quarter, the \$52.00 LST levy should be pro-rated by the number of remaining pay cycles through December 31.
4. In the event a part time employee reaches the \$12,000 threshold, the employer is to withhold a lump sum equal to what full time employees have had withheld up to that point in the year and then continue with pay period withholdings for the rest of the year.
5. In the event an employee is terminated during the quarter, please remit the current amount collected through the termination date.
6. Forms must be filed on or before due date as shown on the face of the form.
7. No collection fee will be allowed on returns filed after the due date shown.
8. Provide Exemption Certificate for employees earning less than \$12,000 during the calendar year. Attach Certificates along with the LST-1 Forms, Employee Listing of taxes withheld, and payment.

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