STATE OF NEW JERSEY Department of the Treasury Division of Taxation

EMPLOYEE'S CERITFICATE OF NON-RESIDENCE IN NEW JERSEY (To Be Used By Pennsylvania Residents Only)

PLEASE SEE REVERSE SIDE FOR INSTRUCTIONS				
(Please Print or Type)				
(Last Name)	(First Name and Middle Initial)	(Social Sec	urity Number)	
(Home Address)				
(City or Post Office) (State) PLEASE COMPLETE BOTH SIDES OF THIS APPLICATION			(Zip Code)	

PLEASE COMPLETE BOTH SIDES OF THIS APPLICATION

NEW JERSEY EMPLOYER:			
YOU ARE REQUIRED TO HAVE A COPY OF THIS FORM ON FILE FOR EACH	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		
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	OF NEW JERSEY GROSS INCOME TAX UNDER THE RECIPROCAL		
AGREEMENT ENTERED INTO BETWEEN NEW JERSEY AND PENNSYLVANIA	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		
NONRESIDENT EMPLOYEE:			
ONLY IF YOU ARE A RESIDENT OF PENNSYLVANIA, MAY YOU CLAIM	PENNSYLVANIA PERSONAL INCOME TAXES ON MY BEHALF.		
EXEMPTION FROM WITHHOLDING NEW JERSEY GROSS INCOME TAX BY	FEINING I LVAINIA FERGUIVAL INCOME TAXES ON MIT BEHALF.		
COMPLETING THIS FORM AND FILING IT WITH YOUR EMPLOYER.	(SIGNED)		
NOTE: IF YOU CHANGE YOUR RESIDENCE FROM PENNSYLVANIA	(OIOIVED)	(Employee's Name)	
TO ANY OTHER STATE <u>YOU MUST NOTIFY</u> YOUR EMPLOYER WITHIN 10 DAYS		(Employee's Name)	
	(DATE)		
	EMPLOYER:	Davis Hairanit.	
	EWIPLOTER:	Rowan University	
		201 Mullica Hill Road	
		Glassboro, NJ 08028	