

OCCUPATIONAL PRIVILEGE TAX FORM

McCRACKEN COUNTY, KENTUCKY

This form was produced by the Oak Ridge Field Office of the U.S. Department of Energy (DOE) for the use of the Paducah, KY Site Office Employees. The completion of this form enrolls the employee for automatic payroll deduction of the McCracken County, KY Occupational Privilege Tax. This tax is equivalent to one percent (1%) of gross earnings. The Code of Federal Regulations 31 CFR Chapter II, Subpart C, Section 215.8, paragraph (b) requires automatic payroll deduction of local taxes on U.S. Government employees provided the local government entity has an approved agreement with the U.S. Department of the Treasury. McCracken County received an approved agreement from the U.S. Department of the Treasury on February 19, 1987; therefore, DOE is required to deduct this tax from all employees working in McCracken County, KY. The employee is not relieved of his/her tax liability by not completing this form. This form merely serves as an administrative control for the DOE Headquarter's payroll office.

Please Print Full Name Below:

(LAST)

(FIRST)

(MIDDLE)

SIGNATURE

DATE

SOCIAL SECURITY NUMBER *

* (See back of form for Privacy Act Statement)

FOR DOE HEADQUARTERS' PAYROLL USE ONLY

Beginning Date: _____

The above named person is an employee of the DOE Oak Ridge Field Office and must be enrolled for payroll deduction of the McCracken County, Kentucky Occupational Privilege Tax. This tax is equal to ONE PERCENT (1%) OF GROSS EARNINGS. The following state and local codes are to be entered in the PAY/PERS system:

STATE-CODE = 21
LOCAL-TAX-CODE-1 = 210145

PRIVACY ACT STATEMENT: Section 6311 of Title 5 to the U.S. Code authorizes collection of this information. The primary use of this information is by management and your payroll office to process payroll payments. Additional disclosures of the information may be: To the Department of Labor when processing a claim for compensation regarding a job connected injury or illness; to a State unemployment compensation office regarding a claim or other benefits; to Federal Life Insurance or Health Benefits carriers regarding a claim; to a Federal, State, or Local law enforcement agency when your agency becomes aware of a violation or possible violation of civil or criminal law; to a Federal Agency when conducting an investigation on you for employment or security reasons; to the Office of Personnel Management when the information is required for retirement records and benefits; to the General Services Administration in connection with its responsibilities for records management; to the Treasury Department for collection of taxes withheld, printing of payroll checks, and issuance of savings bonds; to the Internal Revenue Service for the processing of Federal income tax; to the Social Security Administration for Social Security records and benefits; to State and Local Governments for processing state and local income taxes; to the Department of Defense Military Retired Pay Offices for adjustment of Military Retirement; to Savings Institutions to credit accounts for savings made through payroll deductions; to Employee Unions to credit accounts for employees with union dues deductions; to the General Accounting Office, Audit – for verification of the accuracy and legality of disbursement; to the Veterans' Administration for evaluating veteran's benefits to which the individual may be entitled; to a State or Local government concerning withholding of any state or local taxes; and any additional routine uses listed in Appendix B of 47 Federal Register, Et. Seq. 14284, dated 4/2/82.

Where the employee identification number is your Social Security Number, collection of this information is authorized by Executive Order 9397. Furnishing the information on this form, including your Social Security Number, is voluntary, but failure to do so may result in the additional processing time of this request and/or failure to withhold the tax.

If the U.S. Department of Energy uses the information furnished on this form for purposes other than those indicated above, we will provide you with an additional statement reflecting those purposes.