

**CITY OF MORGANTOWN
MUNICIPAL SERVICE FEE ADMINISTRATIVE REGULATIONS**

§ 1 Purpose and Effect.

These administrative regulations and the forms appended hereto are promulgated by the Finance Director of the City of Morgantown pursuant to City Code, Article 745, all relating to administration of and compliance with the municipal service fee (the "Fee").

§ 2 Guidelines for Orderly Collection and Payment of Fee.

(a) *Effective Date.* The Fee accrues each calendar week during which an individual Employee or Self-Employed Person is Employed in Morgantown. A calendar week begins each Sunday and runs through the next succeeding Saturday. The Fee is effective for all calendar weeks beginning January 1, 2016. No proration is allowed with respect to the week beginning January 1, 2016, nor is proration allowed respecting any week during which an Employee or Self-Employed Person changes Employment status. The entire Fee is due if an individual is an Employee or Self-Employed Person to whom the Fee applies for any part of a calendar week beginning January 1, 2016.

(b) *Employer Withholding and Remittance.* For each individual who is an Employee to whom the Fee applies, that individual's Employer shall withhold from that Employee's paycheck the entire amount of the Fee. For an Employer that follows a regular payroll cycle other than on a weekly or bi-weekly basis, the Employer may elect to withhold and an Employee may pay a computed Fee based upon the Employer's regular payroll cycle in accordance with the following: The computed Fee paid and withheld respecting a weekly payroll cycle shall be \$3.00 for each Employee, Bi-weekly payroll cycle shall be \$6.00 for each Employee, semi-monthly payroll cycle shall be \$6.50 for each Employee for each half-month, and the computed Fee paid and withheld respecting a monthly payroll cycle shall be \$13.00 for each Employee for each month. If the Employer elects to withhold a computed Fee in accordance with the preceding sentence with respect to a payroll cycle, then (i) the Employer shall withhold the computed Fee for all Employees subject to that payroll cycle; (ii) no proration shall be allowed with respect to any payroll period during which an Employee changes Employment status; (iii) the fee shall be effective for all payroll periods ending on or after January 1, 2016; and (iv) the election shall not be revoked for any subsequent payroll periods without the written approval of the Finance Director consenting to the revocation.

(c) *Prior Payment of Fee.* Notwithstanding anything herein to the contrary, an Employer who receives in good faith and retains a properly completed Prior Payment Form (in the form set forth in the appendix, Form MSF-3) from an Employee shall be relieved from withholding the Fee with respect to that Employee for periods ending on and after the Employer's receipt of the properly completed Prior Payment of Fee Form until the Form is no longer effective. The Form is not effective for any period the Employer has any reason to believe that the Employee's assertions on the Form are not at that time materially accurate or upon issuance of notice by the Finance Director of disallowance of the Form.

(d) *Municipal Service Fee remittance Form.* If a Self-Employed Person to whom the Fee applies is a member or partner of an entity that is an Employer subject to the withholding requirements of Section 2(b) of these regulations and that Self-Employed Person is entitled to or otherwise regularly receives a periodic distribution or draw from the Employer, the Self-Employed person shall remit the Fee to the Employer as though the Self-Employed Person were an Employee and the Employer shall collect and remit the Fee from each such Self-Employed Person along with all amounts withheld from Employees in accordance with these regulations.

(e) *Failure to Withhold or Remit.* An Employer required to withhold the Fee that fails to withhold the Fee with respect to any period with respect to any Employee shall be liable for the Fee and all interest and penalties accrued thereon. An Employer that withholds the Fee with respect to any period with respect to any Employee that fails to remit the Fee to the Finance Director when due shall be liable for the Fee and all interest and penalties accrued thereon. An Employer that receives the Fee from a Self-Employed Person in accordance with Section 2(d) and that fails to remit the Fee to the Finance Director when due shall be liable for the Fee and all interest and penalties accrued thereon.

§ 3 Form to Accompany Remittance.

Each remittance to the Finance Director shall be by a good check or warrant and shall be accompanied by a Remittance Form (in the appropriate form set forth in the appendix, Form MSF-1) respecting the applicable reporting period. A Remittance Form shall be fully completed and legible and shall be signed by the Employer or Self-Employed Person, as the case may be, where indicated. Failure to file a complete, legible and signed Remittance Form with a remittance renders a remittance materially incomplete and the remittance shall be deemed not to be made for purposes of Code section 745.99 until the appropriate Remittance Form is duly filed.

§ 4 Reporting Period; Due Dates.

Each calendar quarter ending March 31, June 30, September 30 and December 31, respectively after January 1, 2016 shall constitute a separate reporting period. All Fees withheld and received by an Employer and all Fees accrued with respect to a Self-Employed Person, accompanied by the appropriate Remittance Form, during a reporting period shall be delivered to the Finance Director no later than the last day of the month next succeeding close of the reporting period. A remittance and Remittance Form delivered by United States mail shall be deemed delivered on the date of the legible United States postmark on the envelope properly addressed to the Finance Director with postage fully paid within which the remittance and Remittance form are enclosed. If the due date falls on a Saturday, Sunday or legal holiday in City, then the due date shall be the next day that is not a Saturday, Sunday or City legal holiday.

§ 5 Records and Worksheets.

Every Employer required to remit a Fee for a reporting period shall maintain and retain each of the records set forth in this Section 5 and for three years after the Remittance Form is filed with respect to a particular reporting period. Upon request, the Employer shall promptly provide copies of these records to the Finance Director or make the records available for reasonable inspection at an accessible location within the City, at the Finance Director's option. The worksheet, prior payment form and employee information described in this Section 5 are not to be submitted to the Finance Director unless specifically requested.

(a) *Worksheet.* Every Employer shall complete, retain and make readily available a separate worksheet (in the form specified in the appendix, Form MSF-2) with respect to each reporting period signed by the Employer or the individual authorized by the Employer preparing the worksheet that corresponds to the Remittance Form filed with respect to the reporting period.

(b) *Prior Payment Form.* Every Employer shall retain and make readily available a separate and fully executed Prior Payment Form (in the form specified in the appendix, Form MSF-3) with respect to each Employee if such Prior Payment Form affects the amount remitted during the reporting period, together with any evidence from the Employee respecting the continued validity of the Form and any notice of the Finance Director relating to a disallowance of any such Prior Payment Form.

(c) *Employee Information.* Each Employer shall compile and retain the following information with respect to each Employee Employed by the Employer during the reporting period: the name, hire date, termination date (if appropriate), address, identification number of each Employee subject to the Fee during the reporting period.

§ 6 Refund Claims.

All refund claims shall be on the Refund Claim Form (in the form specified in the appendix, Form MSF-4). The claim must be filed within 30 days after the fee is paid over to the Finance Director by the Employer. However, if the Employer remits the fee prior to the due date, then the claim must be filed no later than 30 days after the due date of the remittance. The time period for filing refund claims is strictly enforced and cannot be waived. A complete and signed Refund Claim Form delivered by United States mail shall be deemed delivered on the date of the legible United States postmark on the envelope properly addressed to the Finance Director with postage fully paid within which the Refund Claim Form are enclosed. If the due date falls on a Saturday, Sunday or legal holiday in City, then the due date shall be the next day that is not a Saturday, Sunday or City legal holiday.

§ 7 Additional Guidance.

The following examples, in a question and answer format, provide additional guidance:

(a) *Vacation, Business Travel, Paid Leave.*

Q: How does the Fee work with respect to an employee, otherwise based in Morgantown, who spends the week on paid vacation, paid-out-of-town business travel, paid leave, or the like?

A: The Fee continues to apply with respect to an employee who, prior to the paid-out-of-office time, was liable for the Fee unless, prior to the commencement of the paid-out-of-office time, the employee had been indefinitely reassigned to a specific location outside the City.

(c) *Contractors and Sub-Contractors.*

Q: How does the Fee apply to contractors and sub-contractors providing services within the City?

A: The Fee is imposed upon self-employed persons that maintain an office or are physically reporting to one or more locations within the City. The Fee is imposed upon an employee employed at or physically reporting to one or more locations within the City. For Contractors and Sub-Contractors that do not maintain an office within the City, the Fee will only be due for weeks in which work occurred within the City. Fees are not prorated for partial weeks. For Contractors and Sub-Contractors that do maintain an office within the City, the Fee will be due for all employees.

(d) *Rental Property Owners.*

Q: How does the Fee apply to rental property owners providing services within the City?

A: The place of business is determined as the location of the rental property and the fee would be imposed on an individual owning the property unless the property owner is not subject to the self-employment tax. If the individual is not subject to the self-employment tax they will be exempt from

the municipal service fee but any employee who performs work at that rental location will be subject to the weekly service fee. Fees are not prorated for partial weeks.

§ 8 Privacy Act Statement.

Disclosure of a Social Security Number (SSN) to the City of Morgantown is voluntary. If you do not wish to disclose your SSN, you may provide an alternative identification number. The City of Morgantown solicits this information pursuant to West Virginia Code § 8-13-13. The City of Morgantown will not disclose your SSN or any other personal information you provide to any other entity or party. The City of Morgantown requests this information to facilitate the verification of withholding and payment of service fees.

§ 9 Confidentiality; Retention and Disclosure of Information.

All remittance forms filed by Employers and Self-Employed Persons concerning the Fee and all information, worksheets and forms referenced in Section 5 reviewed or requested by the City are considered to be confidential records. The City retains the right to destroy extraneous information submitted in connection with the Fee that is neither requested nor used for Fee administration purposes. The City reserves the right to disclose or publish information consisting of names and delinquent amounts (or estimates thereof) concerning the Fee after notice of delinquency is sent to the last known address of the delinquent Employer or Self-Employed Person.

If the Code and these administrative regulations do not answer your questions about the application of the Fee, please submit your questions in writing to the Finance Department at the following address: email servicefee@morgantownwv.gov or U.S. mail: City of Morgantown, Finance Department, 389 Spruce Street, Morgantown, WV 26505.

**APPENDIX
FORMS**

<i>Number</i>	<i>Title</i>
MSF-1	Employer Remittance Form
MSF-2	Employer Worksheet
MSF-3	Prior Payment Form
MSF-4	Refund Claim Form



MUNICIPAL SERVICE FEE CITY OF MORGANTOWN, WV

389 SPRUCE STREET
MORGANTOWN, WV 26505
Phone: (304)225-3597 Fax: (304)284-7424
www.morgantownwv.gov
Email: llivengood@morgantownwv.gov

THIS SECTION MUST BE COMPLETED

ACCOUNT #: _____ FEE QUARTER: _____
Business Name: _____
Mailing Address: _____

CITY OF MORGANTOWN, WV
MUNICIPAL SERVICE FEE
MORGANTOWN FINANCE DEPARTMENT

MSF REMITTANCE FORM

Form **MSF-1**
(11/15)

See instructions on the
reverse side of this form ►

Number of Employees in Morgantown: _____
Number of Self-Employed in Morgantown: _____
Total Number of Workers in the City: _____
Total Number of Waivers provided by employees: _____

Amount of City Service Fee
Required to be Remitted
This Period: \$ _____

Physical Location of Business in Morgantown, WV: _____
Contact Phone Number of Preparer: _____
Contact Email Address of Preparer: _____

PLEASE CHECK BOX IF ADDRESS HAS CHANGED.

UNDER PENALTIES OF PERJURY, I DECLARE
THAT I HAVE EXAMINED THIS RETURN AND
TO THE BEST OF MY KNOWLEDGE AND
BELIEF, IT IS TRUE, CORRECT AND
COMPLETE.

TYPE OR PRINT NAME AND TITLE OF PREPARER

X
PREPARER SIGNATURE AND DATE

MSF Instructions for Employer and Self-Employed Remittance Form

1. Complete, sign and date this return. **Failure to complete this form in its entirety and/or enclose your remittance will result in your return being returned to you.**
2. It must be accompanied by the required remittance no later than the last day of the month succeeding the close of each calendar quarter.
3. Employers must use this form to remit amounts withheld from employees and amounts received from certain self-employed persons who are members or partners of the Employer. Self-employed persons who are not members or partners of an Employer must use this form to remit the amount of **City Service Fee** due.
4. The amount of fee required to be remitted shall be \$3.00 times the number of calendar weeks ending in such calendar quarter during which the self-employed and/or employee worked in the City of Morgantown as a sole proprietor, member of a firm or as an employee. For example, if the self-employed individual/member/employee works the entire quarter the amount due shall be \$39.00.
5. If your name and/or address printed on the form is incorrect, please mark through the incorrect information and write the correct information in the open space.
6. **Employers must retain Worksheet Form MSF-2 that corresponds to this return.**
7. If your return is received after the due date, you will be sent a letter for penalty and interest due.
8. Please make checks payable to: City of Morgantown
9. Mail payments and/or correspondence to: City Finance Department, 389 Spruce Street, Morgantown, WV 26505
10. For further information, please contact the Finance Department at (304)225-3597.

Our office is open daily, Monday through Friday from 7:00 a.m. to 5:00 p.m., except holidays.

Please note that only this remittance form will be accepted. Any change or modification to this form will also result in your return being returned to you.

Period Ended	Due Date	Number of Employees and Self Employed Persons Included		
Employer Name		Employer's Tax Identification Number		
Mailing Address (number and street)		Phone Number		
City, State, and Zip Code				
Basis of Computation (choose one)	Weekly <input type="checkbox"/>	Bi-Weekly <input type="checkbox"/>	Semi-Monthly <input type="checkbox"/>	Monthly <input type="checkbox"/>
	\$3.00	\$6.00	\$6.50	\$13.00

	A	B	C	D	
	Pay Period or Week Ending Date	Number of Employees in Morgantown	Number of Self-Employed in Morgantown	Number of Waivers provided by Employees	Total
a					
b					
c					
d					
e					
f					
g					
h					
i					
j					
k					
l					
m					
X	TOTAL				

By signing below, I attest I have prepared this Employer Worksheet (MSF-3), and it is true and accurate to the best of my ability. I also understand this form is to be retained by the Employer.

Type or Print Name and Title of Preparer	Preparer Signature and Date
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Instructions for Employer Worksheet
 This form must be completed based on the Basis of Computation method above chosen by the Employer disclosed on the worksheet. The dates entered in lines "a" through "m", Column A shall be the ending dates for each weekly, bi-weekly, semi-monthly, or monthly pay period, depending on the period used and elected by the Employer, throughout the entire reporting period. The total in line X, Column D is multiplied by the appropriate rate (depending upon the Basis of Computation withholding method) to determine the total Municipal Service Fee to be remitted for the reporting period. **This form must be signed and retained by the Employer.** For additional information please contact the Finance Department at (304)225-3597 or email to llivengood@morgantownwv.gov.

Instructions for Prior Payment Form

CITY OF MORGANTOWN, WV.
Municipal Service Fee
Morgantown Finance Department

Prior Payment Form

Form **MSF-3**

▶ See instructions below.
Please type or print legibly.

If you are presently employed at more than one job in the City of Morgantown, and the City Service Fee is currently being withheld by more than one employer, simply complete this form and give it to your second employer (Employer #2). **Section 1** – This section is to be completed by the employee. **Section 2** – This section is to be completed by the employee. **Section 3** – This section is to be completed by your first employer (Employer #1). **Section 4** – This section is to be completed by an authorized representative of your first employer (Employer #1). After this form has been completed in its entirety, it should be given to your second employer (Employer #2), and retained by them. After your second employer receives this form, they are no longer required to withhold the fee. **This form should not be sent to the Finance Department**

1. Enter Employee Information.

Full Name	Employee's Identification Number or last 4 of SS#
Mailing Address (number and street)	Phone Number
City, state and ZIP code	

2. Employee Statement:

By signing below, I certify that I am presently employed at more than one job in the City of Morgantown, and the City Service Fee is currently being withheld by more than one of my employers. I do hereby request that my employer in possession of this form, my second employer (Employer #2), stop withholding the City Service Fee because my first employer (Employer #1) is also withholding the fee. I agree to notify my second employer (Employer #2) immediately should the foregoing statement no longer apply for any reason, including change of employment, location of employment, or any other reason. Under penalty of perjury, I attest the subsequent statement is true, accurate, and complete to the best of my knowledge.

Employee's Signature	Date Signed
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3. Enter Employer #1 Information.

Name of Business	Employer's Tax Identification Number
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4. Employer Acknowledgement: (This section to be completed by Employer #1)

By signing below, I certify that I am duly authorized and designated by Employer #1 in Section 3 above to review and confirm this form, and that I am reasonably familiar with the employee listed in Section 1 above. I have no reason to believe that any statement made in this form is untrue or misleading in any respect.

Type or Print Name of Employer Representative, Title	Employer Representative Signature	Date
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Refund Claim Form

Form **MSF-4**

▶ See instructions below.

(11/2015)

Please type or print legibly.

1. Enter Employee Information.

Full Name	Employee's Identification Number
Mailing Address (number and street)	Phone Number
City, state and ZIP code	

2. Enter Claim Information.

Employer Name and Identification Number	
Amount of Refund Claimed (cannot exceed \$39.00)	
State all reasons for claim (attach copy of pay stub(s) reflecting fee withheld from pay during period)	

3. Employee Statement:

I hereby request a refund of amounts of the fee withheld as specified. I consent to the City of Morgantown Finance Department's verification of information in this form by contacting the Employer named herein or otherwise. Under penalties of perjury, I declare that the foregoing statement is true, correct and complete to the best of my knowledge.

Employee's signature	Date signed
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Instructions for Prior Payment Form

Use this form only if the Employee is claiming a good faith refund of amounts withheld and paid over by the Employer identified. A copy of a pay stub reflecting withholding by the Employer must accompany this form. This form must be filed within 30 days after the fee is paid over to the City of Morgantown Finance Department by the Employer that withheld the fee from the Employee. If the Employer remits the fee prior to the due date, then the form must be filed within 30 days after the due date of the remittance. Misuse of this form is prohibited. The Employee must state all reasons supporting the claim in the space indicated (or in an attached sheet) and a copy of all relevant pay stubs must accompany the form. All refund claims shall be timely mailed to the City of Morgantown, Finance Department, 389 Spruce Street, Morgantown, WV 26505. For further information, please contact the Finance Department at (304)225-3597.