

REV-1518 (EX) MOD 01-20

## IMPORTANT INFORMATION FOR FIRMS REQUESTING A WRONGFUL DEATH/SURVIVAL ACTION APPROVAL LETTER FROM THE PENNSYLVANIA DEPARTMENT OF REVENUE

The following information should be supplied with each request so that the request can be reviewed in a timely manner. Please allow 30 business days (approximately 4-6 weeks) from the date the department receives all of the needed documentation.

- 1. A copy of the petition prepared for the court.
  - a. The copy provided to the department does not need to be a finalized copy,
  - b. The department does not require the verifications to be signed.
- 2. Documentation concerning the decedent:
  - a. Name of the estate.
  - b. Copy of the letters granted,
  - c. File number of the estate,
  - d. Social Security number,
  - e. Age of the decedent at death, and
  - f. Educational history.
- 3. Nature of opening of estate:
  - a. If testamentary letters were granted, a copy of the will.
  - b. If administrative letters were issued, a listing of the intestate heirs.
- 4. If applicable, documentation concerning any pain and suffering incurred by the decedent prior to death.
  - a. If death was caused by an error of a medical institution in diagnosing an illness, the length of time that individual had the illness prior to death.
  - b. If death was caused by an error in caring directly for the decedent by a medical institution/nursing care facility, the length of time from the incident until death.
- 5. If applicable, documentation concerning the future wage loss of the decedent due to death. This material should include if possible:
  - a. An economic loss report prepared by an expert in that field,
  - b. Annual wage statement for the past three years, and
  - c. Any other income being received by the decedent for the past three years.

## Wrongful Death/Survival Action Approval Letter

- 6. If applicable, documentation concerning the future economic loss incurred by the wrongful death claimant. This should include:
  - a. Monthly expenses paid by the decedent,
  - b. Monthly work done by the decedent to supplement the claimant's income.
  - Rental expenses, food costs, and utilities paid by the decedent for the claimant.
  - d. Claimant educational costs being paid by the decedent, and
  - e. Any other information to support the future economic loss incurred by the claimant.

## 7. DO NOT PROVIDE:

- a. Police report of the accident scene,
- b. Autopsy report of the coroner,
- c. Medical records,
- d. The complaint.
- Please expect a reasonable amount of time for processing. The average processing time is approximately 30 business days (approximately 4-6 weeks) from the date the department receives all of the needed documentation.

Cases are reviewed in a first in/first out order regardless of the size of the claim. Reminder: The two months with the largest volume of requests for approvals are August and December as they are the last months for approval of medical cases paid under the MCARE Fund for a given calendar year. For additional information on how to handle settlements regarding MCARE or Nonresident Decedents see form REV-1517.

9. If using mail, send all proposals for a wrongful death/survival action claim response letters to:

PA DEPARTMENT OF REVENUE
INHERITANCE TAX DIVISION
ATTN: WRONGFUL DEATH/SURVIVAL
ACTION REQUEST
PO BOX 280600
HARRISBURG PA 17128-0600

10. Petitions can be submitted electronically to:

## RA-WDSAsettlement@pa.gov

**Do not** email and mail the same proposal more than one time as it causes duplication in processing. If the petition is submitted more than once, we will use the last date received.

If you have any questions or concern, please call the department at 717-787-8327.

www.revenue.pa.gov REV-1518 1