

# MUNICIPAL AND SCHOOL INCOME TAX REGISTRATION

➔ IF BUSINESS IS INCORPORATED, COMPLETE BOTH SIDES OF THIS FORM. ➔

To Be Answered  
Within 10 Days  
And Returned In  
The Enclosed  
Envelope



earned income tax administrator  
50 North Seventh Street  
Bangor, PA 18013

For Tax Office  
Use Only  
Account Code No.

\_\_\_\_\_  
\_\_\_\_\_

To comply with Act 511 of The Pennsylvania State Legislature (and the law in your local taxing district), you are required to answer the following questions. All information will be held in strict confidence.

(Please Print or Type)

### TO BE ANSWERED BY BUSINESS OWNERS AND/OR EMPLOYERS:

1. Name(s) of the Owner(s) \_\_\_\_\_

If business is NOT INCORPORATED,

Give home address of Owner(s): \_\_\_\_\_

2. Trade Name \_\_\_\_\_

(If different from above)

3. Federal Employer I.D. No. \_\_\_\_\_

4. Business Telephone No. \_\_\_\_\_ / \_\_\_\_\_

5. Correct Taxing Jurisdiction:

(Name of Township or Borough where business is located)

\_\_\_\_\_

6. Mailing Address where all forms are to be sent \_\_\_\_\_

\_\_\_\_\_

7. Check Type of Organization:    PROPRIETORSHIP     PARTNERSHIP     CORPORATION

OTHER (Explain): \_\_\_\_\_

8. Kind of Business \_\_\_\_\_ Date Business Started: \_\_\_\_\_

(Month and Year)

9. Number of Employees \_\_\_\_\_ (Include both Full and Part-time)

I hereby certify that all information and statements herein are true and correct.

Date \_\_\_\_\_

\_\_\_\_\_  
(Signature)

### SPECIAL NOTICE

All businesses should notify the EARNED INCOME TAX OFFICE of any changes in address, ownership, etc., promptly, so that all records may be adjusted. If business is discontinued, please advise us within thirty days stating if same has been liquidated or sold. If sold, give name and address of new owner.