



To be filed with:

e-Collect
804 Fayette Street
Conshohocken, PA 19428
(866) 225-0033

CITY OF CHESTER BPT/MERC REGISTRATION FORM YEAR 2018

Instructions & Deadline: The following registration form is required to be completed by each company with a business location in the City or any business operating within the territorial boundaries of the City. This Application is due annually no later than April 15, 2018.

This Application is separate from and does not replace the Business Privilege / Mercantile Tax Return. Please make a copy of this registration for your records. A license for your records will be mailed after payment is submitted. The license fee is \$5.00 per location and should be remitted with the tax form.

License Year: _____ Business Start Date: _____

Legal Name of Business: _____

Trade Name (d/b/a): _____

Mailing Address: _____ Physical Address: *(If different from Mailing Address)*

Telephone: _____ Fax: _____

Email Address: _____

Total Number of Employees: _____ Federal Employer Identification No.: _____

Business Location(s): _____

Business Organization Type (check one)

- Sole Proprietorship Partnership Corporation or LLC (PA Entity No.)
 Other _____) (Describe: _____) Non

I hereby certify under the penalties provided by law that all statements made herein are to the best of my knowledge and belief true, correct and complete.

Applicant's Signature: _____

Printed Name: _____

Date: _____ Telephone: _____