



To be filed with:  
eCollect+  
804 Fayette Street  
Conshohocken, PA 19428  
(866) 225-0033

**FOLCROFT BOROUGH**  
**BPT/MERC REGISTRATION FORM YEAR 2020**

**DUE: no later than March 31, 2020.**

**Instructions & Deadline:** The following registration form is required to be completed by each company with a business location in Folcroft Borough or any business operating within the territorial boundaries of Folcroft Borough.

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. The license fee is \$25.00 per location and should be remitted with the tax form.

License Year: _____	Business Start Date: _____
Legal Name of Business: _____	Trade Name (DBA): _____
Mailing Address: _____ _____ _____	Physical Address: _____ _____ _____
Phone: _____	Fax: _____
Email: _____	Federal EIN: _____
Business Location(s): _____	

Business Organization Type (check one)

<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Partnership	<input type="checkbox"/> Corporation or LLC	PA Entity No. _____
<input type="checkbox"/> Other: _____)	Describe: _____)	<input type="checkbox"/> Non	

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**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: _____	Phone: _____