



To be filed with:

City of McKeesport,
c/o e-Collect+, LLC
804 Fayette Street
Conshohocken, PA 19428

(866) 225-0033 x 711

**CITY OF MCKEESPORT
MERCANTILE LICENSE & BUSINESS PRIVILEGE TAX
REGISTRATION FEE**

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 thirty days after receipt. This Application is separate from and does not replace the Business Privilege / Mercantile Tax Return. A copy of your license will be emailed to you after payment is made.

License Year: 2015 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 (PA Entity No. _____)

Other (Describe: _____) Non Profit/Religious/Charitable

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: _____