



Make checks payable to:
eCollect+
804 Fayette Street
Conshohocken, PA 19428
(866) 225-0033

**BROOKHAVEN BOROUGH
BUSINESS PRIVILEGE / MERCANTILE
TAX REGISTRATION FORM YEAR 2025
PSD Code: 230702**

Instructions & Deadline: The following registration form is required to be completed by each company with a business location in Brookhaven Borough or any business operating within the territorial boundaries of Brookhaven 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 \$50.00 per location and should be remitted with this registration form.**

This Application is due for Business Privilege Tax and Mercantile Tax: April 15, 2025.

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 only applicable)

<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-Profit/Religious/Charitable	
<input type="checkbox"/> Service	<input type="checkbox"/> Rental	<input type="checkbox"/> Retail	<input type="checkbox"/> Wholesale

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. (PLEASE DO NOT STAPLE CHECK TO THIS FORM)

Applicant's signature: _____ Printed name: _____
Date: _____ Phone: _____