



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

**UPPER DARBY TOWNSHIP  
BUSINESS PRIVILEGE / MERCANTILE  
TAX REGISTRATION FORM YEAR 2024  
PSD Code: 231303**

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

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 \$50.00 per location and should be remitted with this registration form.**

**This Application is due for Business Privilege Tax and Mercantile Tax: January 31, 2024.**

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)

Sole Proprietorship       Partnership       Corporation or LLC      PA Entity No. \_\_\_\_\_

Other: \_\_\_\_\_)      Describe: \_\_\_\_\_)       Non

Service       Rental       Retail       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: \_\_\_\_\_