

MUNICIPALITY OF MONROEVILLE
BUSINESS REGISTRATION
www.monroeville.pa.us

Account # _____

Incomplete forms will be rejected

The taxes levied by Municipal Code require anyone engaged in any business activity to register with the Municipality by providing the following information: (type/print legibly)

Name Doing Business as _____ Local # () _____
Owner of Business _____ Fax # () _____
Business Address in Monroeville _____
(Use employee address if working from home)
Select type of business entity:
Individual ___ Partnership ___ LLC/Corp. ___ Other ___ provide description
Federal Tax Identification Number _____
DATE BUSINESS OPENED IN MONROEVILLE (MONTH/DAY/YEAR) _____
Number of Employees at Monroeville Location _____
Description of Business Activities attributable to Monroeville location:

Mercantile or Business Privilege License and Tax form mailing address:

Attention: _____ Title: _____ Phone # _____
Email address: _____ Fax # _____

Local Services Tax form address: (Complete only if different than other addresses)

Attention: _____ Title: _____ Phone # _____
Email address: _____ Fax # _____

Name, Social Security Number, & Residence Address of Individual Owners, Partners, Corporate Officers: (attach list if necessary)

Name	_____	SS #	_____ - _____	Title	_____
Address	_____				

Certification: I hereby certify that the information contained herein is true, correct and complete to the best of my knowledge.

Signature: _____ Title: _____ Date: ____/____/____

NOTE: ANY CHANGES TO THE INFORMATION GIVEN HEREIN MUST BE READILY REPORTED TO THE BUSINESS TAX OFFICE TO ENSURE PROPER FILING OF RETURNS.

Return to: Business Tax Office 2700 Monroeville Blvd. Monroeville, PA 15146-2388
Direct inquiries to: montax@monroeville.pa.us Fax 412-856-1054 or Telephone 412-856-3347

Earned Income Tax: Employer withholding is mandatory for anyone working in PA. Payments must be made quarterly including self employed individuals. Contact Keystone Collections Group 546 Wendel Rd, Irwin PA 15642 www.keystonecollects.com 724 978 0300.

TAX OFFICE USE: Bus Industry # _____	BUS RTN _____	LIC _____	LST _____
Building Permit # _____	DATE ____/____/____	INITIALS _____	_____