

TOWNSHIP OF WILKINS
BUSINESS REGISTRATION
www.monroeville.pa.us

Account # _____

The taxes levied by Municipal Code require anyone engaged in any business activity to register with the TOWNSHIP OF WILKINS the following information: (type or print neatly)

Business Name _____ Local #(412) _____

Name of Owner _____ Fax # (412) _____

Business Address in Wilkins _____

Type of business entity (Check () applicable category):

Individual Partnership Corp. Other: (send description)

Federal Tax Identification Number _____

DATE BUSINESS OPENED IN Wilkins (MONTH/DAY/YEAR) _____

Description of Activity _____

Mercantile or Business Privilege tax form mailing address:

Attention: _____ Phone # _____ Fax # _____

Email address: _____

Local Services Tax form mailing address:

(Complete only if mailing address is different from the above addresses)

Attention: _____ Phone # _____ Fax # _____

Number of Employees at Wilkins Location _____

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: ____/____/____

Return to: Wilkins Business Tax Office
2700 Monroeville Blvd.
Monroeville, PA 15146-2388

Direct inquiries to: Email:montax@monroeville.pa.us Fax 412-856-1054 or Telephone 412-856-3347

NOTE: TO ENSURE PROPER FILING OF RETURNS, ANY CHANGES IN THE INFORMATION GIVEN HEREIN SHOULD BE REPORTED TO THE BUSINESS TAX OFFICE IMMEDIATELY!!!

Earned Income Tax ONLY is collected by PA Municipal Services Contact them directly:
(Wage tax withholding required for all residents of Wilkins Township) 412 828 8690
PA Municipal Services 21 Yost Blvd, Pittsburgh, PA 15221

TAX OFFICE USE: WRITE IN TAX YEARS / DATE MAILED / AND INITIALS

BUSTX _____ LIC _____ LST _____ EIT _____ DATE ____/____/____ INITIALS _____