





## INSTRUCTIONS

- **Department of Revenue information:**  
PHONE: 215-686-6600  
E-MAIL: revenue@phila.gov  
INTERNET: phila.gov/revenue 
- **Department of Licenses and Inspections information:**  
PHONE: 215-686-2490  
E-MAIL: license.issuance@phila.gov  
INTERNET: phila.gov/li 
- **Your Federal Employer Identification Number must be entered on this application.**
- **A Social Security Number must be entered for a Sole Proprietorship.**

### Block number:

- 1A and 1B.** If this account is for Wage tax and/or Net Profits tax only, check the appropriate box. If applying for a "**Wage Tax Only**" account, the \$250 application fee is **not** required.
2. Indicate the exact date taxable Philadelphia business activity began in the spaces provided.
  3. If you indicate "YES" on the front of the application, the appropriate tax returns will be mailed to you.
  4. Indicate the exact date for which wage tax was first withheld in the spaces provided.
  5. Your taxable monthly payroll will determine if you remit wage tax quarterly, monthly, semi-monthly or weekly.
  6. Check one box only to indicate your primary type of business.
- 6A.** Indicate the exact type of business, e.g., manufacturing children's clothing, retail plumbing supplies, wholesale grocery items, etc.
7. Enter the Pennsylvania Sales and Use Tax license number.
  8. Indicate your entity name.
- 8A.** If you operate your business under a different name than in item 8, enter here.
9. Enter your primary mailing address. **Do not use a Post Office Box number as your business address.**
  10. If different than the mailing address, enter here. **Do not use a Post Office Box number as your business address.** Indicate if you own the property. **If you own the property used for business purposes and it is located within Philadelphia, you will also be liable for Business Use and Occupancy tax.**
  11. **Do not use a Post Office Box number as your branch office address.** Branch locations would include any business location from which you are paying taxes, such as non-Philadelphia retail establishments that withhold wage tax from Philadelphia residents.
- 12 thru 15.** Indicate daytime information.
- 16.** Check the appropriate organization.
- 17, 18 and 19.** If additional space is needed, attach a separate sheet. Corporate officers and partners must include their Social Security numbers in Block 19; corporate partners must include the EIN of the corporation.
- 20A and 20B.** The information requested is on a voluntary basis only. You are not required to furnish this information, but are encouraged to do so. If your entity is a partnership or a corporation, please check the boxes that apply to the majority owner or owners.

**A Business Privilege License is required for business conducted in Philadelphia. The lifetime license fee is \$250. Make check payable to the City of Philadelphia. If submitting this application by fax, you will be billed by the Department of Licenses and Inspections for the \$250 fee. If box 1A, 1B, 16G, 16H or 16I is checked, a Business Privilege License is not required.**