



**HOMESTEAD BOROUGH**  
**221 East Seventh Avenue**  
**Homestead, PA 15120**  
**Phone: (412) 461-1340 Fax: (412) 461-4057**

**BUSINESS PRIVILEGE/MERCANTILE TAX LICENSE**

**BUSINESS LOCATION**

Business Name: \_\_\_\_\_ Zoning District: \_\_\_\_\_ Ward: \_\_\_\_\_  
 Address: \_\_\_\_\_ Parcel ID: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_ - \_\_\_\_\_  
 Contact Person: \_\_\_\_\_ Fax: ( ) \_\_\_\_\_ - \_\_\_\_\_  
 Email: \_\_\_\_\_

**LICENSE YEAR: 2021**

**APPLICANT/BILLING INFORMATION**

Applicant Name: \_\_\_\_\_ Email: \_\_\_\_\_  
 Contact Person (If different from above): \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

**GENERAL INFORMATION**

Pursuant to Homestead Borough Code of Ordinances, Chapter 13, Part 7, every person, partnership, joint venture, limited partnership, company, limited liability company, association, corporation and limited corporation who opens, operates or maintains a place of business within the Borough, advertises a business address, business telephone number or business fax number located in the Borough or otherwise carries on, conducts or engages in a business within the Borough, personally or through an agent or employee, directly or indirectly, permanently or temporarily, or who desires to continue to do so, shall for each activity make application for registration of the license year or prior to commencing business. Such application should be filed with the Borough office.

Has the applicant ever had a license, permit or approval to conduct this business denied or revoked by any Borough or any other jurisdiction? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please explain \_\_\_\_\_

**CERTIFICATION**

I hereby verify that the facts contained in the forgoing application are true and correct to the best of my knowledge, information and belief. I understand that false statements herein are made subject to the penalties of PA C.S. §4904 (relating to unsworn falsification to authorities).

\_\_\_\_\_  
 Signature Date

\_\_\_\_\_  
 Print Name Title/Position

**FEE SCHEDULE**

Business Privilege License Fee (Required for all businesses)		<b>\$100.00</b>
Mercantile License –Retail (Additional fee required for retail businesses)	additional \$100.00	\$
Wholesale (Additional fee for wholesale businesses)	additional \$75.00	\$
Scanning Fee		<b>\$2.00</b>
Document Imaging Fee		<b>\$1.50</b>
<b>TOTAL OF ALL FEES</b>	<b>Payable to: HOMESTEAD BOROUGH</b>	<b>\$</b>

Permit No. \_\_\_\_\_ Invoice No. \_\_\_\_\_ Check No. \_\_\_\_\_

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

Borough of Homestead