



**CITY OF PITTSBURGH
DEPARTMENT OF FINANCE
REQUEST TO PURCHASE FORM FOR BUSINESS ENTITIES
412 255-2300**

ALLOW UP TO 4-6 WEEKS TO PROCESS

BUSINESS NAME: _____

CONTACT NAME: _____

BUSINESS ADDRESS: _____
(Do not use P. O. Box #)

CITY, STATE, ZIP: _____

PHONE NUMBER: _____ FAX NUMBER: _____

EMAIL: _____ CELL PHONE: _____

F. E. I. N.: _____ DATE INCORPORATED OR FORMED: _____

CITY BUSINESS ACCOUNT NUMBER: _____

1ST OWNER/OFFICER NAME: _____ TITLE: _____

HOME ADDRESS: _____

2ND OWNER/OFFICER NAME: _____ TITLE: _____

HOME ADDRESS: _____

If there are additional owners/officers please complete back of form, Section 3.

DO YOU OWN ANY PROPERTY IN THE CITY OF PITTSBURGH? YES: _____ NO: _____

If yes, please complete back of form, Section 5.

DO YOU OWN ANY PROPERTY IN THE CITY UNDER ANOTHER BUSINESS NAME: YES: ____ NO: ____

If yes, please complete back of form, Section 4.

SECTION 2: CITY OF PITTSBURGH PROPERTY

WHAT CITY OWNED PROPERTY DO YOU WANT TO BUY?

PROPERTY ADDRESS: _____ WARD/BLOCK/LOT: _____

WHY ARE YOU BUYING THIS PROPERTY (WHAT ARE YOU GOING TO USE IT FOR)?

WHEN WILL YOU APPLY FOR A BUILDING PERMIT? _____

Your failure to provide complete and accurate information will result in denial and rejection of your request to purchase.

SIGNATURE: _____ DATE: _____

CITY USE ONLY

PURCHASER: _____ OBJECTOR: _____ TAKEN BY: _____

DATE SALE STARTED: _____ DATE: _____ BOOK _____

APPROVED BY: _____ DATE: _____

DENIED BY: _____ DATE: _____ REASON: _____



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DO NOT USE P. O. BOX FOR ADDRESS

SECTION 3: ADDITIONAL OFFICERS

OWNER/OFFICER NAME: _____ TITLE: _____

HOME ADDRESS: _____

OWNER/OFFICER NAME: _____ TITLE: _____

HOME ADDRESS: _____

SECTION 4: OTHER BUSINESS ENTITIES

NAME OF YOUR OTHER BUSINESS ENTITIES THAT OWN PROPERTY IN THE CITY OF PITTSBURGH

BUSINESS NAME: _____

BUSINESS ADDRESS: _____

BUSINESS NAME: _____

BUSINESS ADDRESS: _____

BUSINESS NAME: _____

BUSINESS ADDRESS: _____

SECTION 5: PROPERTY OWNED BY APPLICANT

FOR CITY USE ONLY

	ADDRESS	WARD, BLOCK & LOT	R.E. TAX	W/S	BBI
1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____
5.	_____	_____	_____	_____	_____
6.	_____	_____	_____	_____	_____
7.	_____	_____	_____	_____	_____
8.	_____	_____	_____	_____	_____

ATTACH SEPARATE SHEET IF NEEDED

RETURN COMPLETED APPLICATION TO:

CITY OF PITTSBURGH
DEPARTMENT OF FINANCE
TTB REQUEST TO PURCHASE
414 GRANT ST. 1ST FLOOR
PITTSBURGH PA 15219-2476