

WALK-IN BATCH ONLINE MAIL FAXACCOUNT NUMBER

FOR OFFICIAL USENBR-I
Rev 03/2018**NEW BUSINESS REGISTRATION
CITY OF PITTSBURGH****SIC CODE**

Review Instructions On Reverse Side Before Completing This Form

1. FEDERAL IDENTIFICATION NUMBER 2. SOCIAL SECURITY NUMBER 3. LEGAL NAME 4. TRADE NAME 5. BUSINESS PHONE NUMBER 6. HOME PHONE NUMBER 7. BUSINESS MAIL ADDRESS
Street Number Street Name City State Zip Code + 4 Fax E - Mail Address 8. PITTSBURGH PROPER ADDRESS
If more than one attach list
Street Number Street Name City State Zip Code + 4

9. BUSINESS OPERATED AS:

INDIVIDUAL or a SINGLE MEMBER

PARTNERSHIP

NON-PROFIT CORP (include verification with Non-Profit status)

LIMITED LIABILITY COMPANY

LIMITED LIABILITY PARTNERSHIP

S-CORPORATION

CORPORATION

OTHER

10. DETAIL BUSINESS DESCRIPTION 11. BUSINESS START DATE 12. DATE STARTED IN PITTSBURGH 13. INDICATE TAX LIABILITY - See next page for brief description of each tax. If not sure what taxes you are liable for, call **Taxpayer Assistance at 412-255-2543**

Payroll Expense Tax (ET -1)

Local Services Tax(LST)

Institution Service Privilege Tax (ISP)

Amusement Tax (AT)

Parking Tax (PT)

Non-Residential Sports Utility Fee (UF)

14. RESPONSIBLE PERSONS: OWNERS, PARTNERS, MEMBERS OR OFFICERS- PLEASE INCLUDE INDIVIDUALS AND NOT BUSINESS ENTITIES. IF MORE THAN TWO (2), SUPPLY REQUIRED INFORMATION ON SEPARATE SHEET

LAST NAME- FIRST- MIDDLE

Social Security Number

Street Number Street Name City State Zip Code + 4 **LAST NAME- FIRST- MIDDLE**

Social Security Number

Street Number Street Name City State Zip Code + 4

SIGNATURE

TITLE

DATE -(mm/dd/yyyy)

TO REGISTER A NEW BUSINESS ENTITY & ELIMINATE DELAYS OR THE ASSESSMENT OF PENALTIES

Use these instructions for completing this form. For assistance, change of status or to request forms; call **412-255-2543**

1. **FEDERAL IDENTIFICATION NUMBER** - Enter Federal Employer Identification Number assigned to you by the Internal Revenue Service.
2. **SOCIAL SECURITY NUMBER** – Enter the Owner’s or Primary Partner’s Social Security Number. See Item 14 for Partnerships and S- Corporations.
3. **LEGAL NAME**- Enter legal name of business. To properly identify business type, see instructions for Item 9 below.
INDIVIDUALS- Entrepreneurs or sole proprietors, enter first, middle and last name.
PARTNERSHIPS- Enter first, middle and last name.
CORPORATIONS- Enter legal corporate name registered from home state or Federal Government.
4. **TRADE NAME**- If business trades as a name other than Legal Name, enter the registered “Trade Name.”
5. **BUSINESS PHONE NUMBER**- Enter Pittsburgh area daytime telephone number.
6. **HOME PHONE NUMBER**- Enter home office telephone number or sole proprietor’s home telephone number.
7. **PRIMARY BUSINESS ADDRESS**- Enter the office address where all correspondence will be received, filed and paid. For PO BOX include street address also. If you want a specific tax form to go to a different location or recipient, please provide on a separate sheet the name and address of responsible party.
8. **PITTSBURGH AREA ADDRESS**- The Department of Finance requires knowledge of all Pittsburgh addresses, where business is operated. If more than one (1), include addendum.
9. **TYPE OF BUSINESS**
INDIVIDUAL- Business is not a corporation and not a legal partnership.
CORPORATION- Incorporated businesses are legal corporations that file with state and federal agencies.
PARTNERSHIP- Legal partnership must have a Federal Employer Identification Number (FIN). All partners must be listed.
10. **DETAIL BUSINESS DESCRIPTION**- Indicate the nature of the business, specific product(s), services provided, purpose, etc. Tax liabilities will be determined according to the type of business being registered.
11. **BUSINESS START DATE**- Enter the date when business first commenced operations.
12. **DATE STARTED IN PITTSBURGH**- Enter the date when business commenced or will commence operations **in the City of Pittsburgh**
13. **TAX LIABILITIES**

LOCAL SERVICES TAX	(Formally the Emergency and Municipal Services Tax) – See LST Regulations for details on withholdings or exemptions. All persons engaged in an occupation in the City of Pittsburgh are subject to pay this tax.
PAYROLL EXPENSE TAX	Every employer doing business in the City of Pittsburgh is required to pay a Payroll Tax on the payroll expense and on net distribution from self-employed individuals, members of partnerships, associations, joint ventures or other entities who perform work or provide services within the City of Pittsburgh. The ordinance imposes a Payroll Tax on all businesses that engage, hire, employ or contract with one or more individuals to perform work or render services within the City of Pittsburgh.
INSTITUTION SERVICE PRIVILEGE TAX	Entities engaged in service in the medical, education, social, recreational, vocational or any other type of services where there is a charge collected, except elementary and secondary schools, are required to pay gross receipts. Exception is receipts from the sale of food, drink, or merchandise.
AMUSEMENT TAX	All places of amusement and all producers of amusements are required to collect tax from the patrons and remit the collected taxes to the City of Pittsburgh.
PARKING TAX	All persons or entities within the City the Pittsburgh who park or store motor vehicles for a consideration are required to register and collect the Parking Tax from patrons.
NON-RESIDENTIAL SPORTS UTILITY FEE	Every employer who employs one or more non-resident employees who earn compensation as the result of services performed a publicly funded facility within the city, to engage in an athletic event or otherwise render performance for which a non-resident receives remuneration is required to withhold and remit the fee to the Treasurer.
14. **RESPONSIBLE PERSONS : OWNER, PARTNERS OR OFFICERS**- For individuals, Partnerships and S- Corporations, list the name, address and Social Security Number of the owner, all partners and/or responsible officers. Attach addendum if necessary. For Corporations, list name and address of responsible officer. Limited Liability Company must list member(s).
15. **SIGNATURE, TITLE AND DATE**- Please sign, title and date the form.
16. **Return to:** **Registration, City of Pittsburgh, 414 Grant St RM 207, Pittsburgh PA 15219-2476.**
Or Submit Online: Email your form to registration@pittsburghpa.gov