

PHILADELPHIA TAX STATUS CERTIFICATION REQUEST

CITY OF PHILADELPHIA DEPARTMENT OF REVENUE

REQUESTER: PHA PHDC PIDC PPA PRA OTHER _____

Taxpayer Name: _____ Date: _____

Taxpayer Trading As: _____

Home Address: _____

Business Address: _____ Business Phone #: _____

1. Are you a Registered Taxpayer? Yes No
If so, provide your Federal Employer Identification Number here: > _____
If so, provide your Philadelphia Business Tax Account Number here: > _____
If so, provide your Social Security Number here: > _____

2. Are you presently delinquent in any City of Philadelphia or Philadelphia School District Taxes? Yes No
If so, what tax and amount owed: > _____

3. Are you presently delinquent in Water and Sewer charges? Yes No
If so, amount owed: > \$ _____

4. Have you ever been sued by the City of Philadelphia or the Philadelphia School District or have you declared bankruptcy? Yes No
If so, list date and nature of law suite or filing date of bankruptcy petition: > _____
> _____

5. Are you involved in any other business activity? Yes No
If so, list company name(s) and account number(s) here: > _____
> _____

6. Do you own real estate? Yes No
If so, list address(es) here or on the back of this form. > _____
> _____

I hereby affirm that the information provided above is true and correct to the best of my knowledge, information and belief; said affirmation being made subject to the penalties prescribed by 18 Pa. C.S.A. Sec. 4904 relating to unsworn falsification to authorities

Name: (Please Print) _____ Title: _____

Signature: _____ Date: _____

