

2016  
THE BOROUGH OF WEST MIFFLIN  
BUSINESS PRIVILEGE TAX RETURN  
Due Date: DECEMBER 15, 2016

*(IMPORTANT: This return must be filed with the collector with remittance in full for amount of tax on or before the above due date to avoid the imposition of additional penalties)*

\_\_\_\_\_  
BUSINESS NAME OR BUSINESS OWNER NAME

\_\_\_\_\_  
FEDERAL IDENTIFICATION #

\_\_\_\_\_  
D.B.A. (Doing Business As) IN WEST MIFFLIN

\_\_\_\_\_  
PHYSICAL ADDRESS OF BUSINESS IN WEST MIFFLIN (Do not use P.O. Box as Physical Address)

\_\_\_\_\_  
BUSINESS CORRESPONDENCE AND TAX FORM ADDRESS

\_\_\_\_\_  
BUSINESS LOCATION IN WEST MIFFLIN

PHONE

FAX

E-MAIL

**PRIMARY CONTACT INFORMATION**

NAME: \_\_\_\_\_ RELATIONSHIP TO BUSINESS: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_

FAX # \_\_\_\_\_

.....

AMOUNT DUE	\$ 500.00
Less Credit (see instructions)	_____
TOTAL AMOUNT DUE	_____
Penalty and Interest (1.33% per month after due date)	_____
TOTAL AMOUNT REMITTED	_____

-----

***I THE UNDERSIGNED, DECLARE UNDER PENALTY OF LAW THAT THE INFORMATION CONTAINED ON THIS FORM IS TRUE, FULL AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND BELIEF.***

**SIGNATURE OF AUTHORIZED INDIVIDUAL:** \_\_\_\_\_

**PRINTED NAME OF AUTHORIZED INDIVIDUAL:** \_\_\_\_\_

*PAYMENTS AND RETURNS SHOULD BE SENT TO THE FOLLOWING ADDRESS:*

BOROUGH OF WEST MIFFLIN  
Attention: Kelly Theiss  
1020 LEBANON ROAD  
WEST MIFFLIN, PA. 15122