

BOROUGH OF IRWIN

424 MAIN STREET
IRWIN, PA 15642
724-864-3100

LICENSE NUMBER

PAID: _____

CHECK # _____

DUE DATE: MAY 15, 2018

2018 ANNUAL BUSINESS PRIVILEGE TAX RETURN

CONFIDENTIAL

THIS RETURN, ACCOMPANIED BY YOUR PAYMENT IN FULL MUST BE FILED IN THE TAX OFFICE ON OR BEFORE THE DUE DATE SHOWN ABOVE.

DATE BUSINESS BEGAN IN IRWIN

DATE BUSINESS TERMINATED IN IRWIN

MAKE CHECKS PAYABLE TO: **IRWIN BOROUGH** GENERAL INSTRUCTIONS APPEAR ON THE REVERSE SIDE.

IF PAID BY MAIL AND A RECEIPT IS REQUIRED, SEND A STAMPED SELF-ADDRESSED ENVELOPE

ENCLOSE A COPY OF YOUR FEDERAL INCOME TAX RETURN TO VERIFY THE GROSS VOLUME OF BUSINESS AS REPORTED ON LINE 1

COMPUTATION OF TAX

1. ACTUAL GROSS VOLUME OF BUSINESS	_____	\$ _____	1.
2. PLUS OTHER TAXABLE TRANSACTIONS	_____	+ _____	2.
3. LESS ALLOWABLE EXEMPTIONS AND EXCLUSIONS	_____	- \$5,000.00	3.
4. TAXABLE VOLUME OF BUSINESS (Sum of Lines 1 and 2 less Line 3.)	_____	_____	4.
5. BUSINESS PRIVILEGE TAX DUE (line 4 x .001)	_____	_____	5.
6. PENALTY (Add 10% of Line 5 if paid after the due date shown above)	_____	+ _____	6.
7. INTEREST (Add 1% of Line 5 for each month or part thereof during which the tax remains unpaid after the due date shown above)	_____	+ _____	7.
8. PREVIOUS BALANCE	_____	+ _____	8.
9. TOTAL AMOUNT DUE (Sum of Lines 5, 6, 7 and 8)	_____	\$ _____	9.

I DECLARE UNDER THE PENALTIES PROVIDED BY LAW THAT THIS RETURN HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE IS TRUE AND CORRECT.

AUTHORIZED SIGNATURE

PRINT NAME

DATE

TITLE (OWNER/PREPARER)

PHONE NUMBER