## Make Checks Payable To:

ECOLLECT 804 FAYETTE STREET CONSHOHOCKEN, PA 19428

## BUSINESS PRIVILEGE AND MERCANTILE TAX RETURN 3rd QUARTER 2025

PSD Code: 231002

## MEDIA BOROUGH DELAWARE COUNTY, PENNSYLVANIA



(866) 225-0033 needhelp@e-collectplus.com

IMPORTANT: This return must be filed with full remittance of tax due on or before the due date in order to avoid the imposition of penalties. All businesses must

OWNERSHIP BUSINESS NAME AND ADDRESS:		Schedules. Explain fully any differences between the gross volume on reverse.  FOR OFFICIAL USE ONLY				
		ACCOUNT NO:		RECE	RECEIVED BY:	
					neck	- Manay Ordar
		LICENSE NO. ISSUED:				Money Order
		INDICATE TYPE OF	New	■ I	tinerant	Seasonal
A FINI.		BUSINESS:	■ Transient	<b>■</b> Es	stablished	
A. EIN:		BASE:	Estimated Busin	ness		Actual Business
B. DATE LOCAL OPERATION BE	GAN:					
C. NATURE OF BUSINESS:	etail	ntal ■ Manufacturing* ■ S	Service* ■Trade ■	Construction	_	Amusement  HODS USED ON REVERSE SIDE.
		PLEASE COMPLE	TE PROPER SEC	TION		
MERCANTILE TAX			GROSS VOLUME OF BUSINESS		TAX RATE	AMOUNT OF TAX DUE
RETAIL BUSINI	ESS: 1. TAX	SHIPLACE OF BUSINESS'	DEC. 1513	Х	.00075	
	LICENSE (FOR EAC	CH PLACE OF BUSINESS)	PER YEAR	X	\$100.00 .00075	
WHOLESALE BUSINE	ESS: 2. TAX LICENSE (FOR EAC	CH PLACE OF BUSINESS)	PER YEAR		\$100.00	
						_n
TOTAL TAX DUE (Total of 1 and PENALTY 10% (.1) OF TAX DU	<u>'</u>	O EDACTIONAL MONTH DELL	INIOLIENT			Ц
. ,						
INTEREST 1.25% (.0125) OF TA	X DUE FOR EACH MONTE	TOR FRACTIONAL MONTH DE	LINQUENT			
3. TOTAL MERCANTILE PAYME	NT DUE					<b>-</b> 1
BUSINESS PRIVILEGE TAX				GROSS VOLUME OF BUSINESS		AMOUNT OF TAX DUE
SERVICE:	4. TAX		Х	.00150		
(Include Rental Business) 5. LICENSE (FOR EACH PLACE OF BUSINESS)  A SEPERATE LICENSE IS NECESSARY FOR EACH PLACE OF BUSINESS. NOTE: A fee of \$10.00 will			PER YEAR		\$100.00	
be charged for replacement of any		Х				
conspicuously at all times. New, se before commencing business and p	,					
	•	,	1	J		
TOTAL TAX DUE (Total of 4 and 5)						Ц
PENALTY 10% (.1) OF TAX DUE						
INTEREST 1.25% (.0125) OF TA	X DUE FOR EACH MONTH	OK FRACTIONAL MONTH DE	LINQUENT			
6. TOTAL BUSINESS PRIVILEGE	PAYMENT DUE					
TOTAL PAYMENT DUE	TAL PAYMENT DUE October 31, 2025 (Total of 3 and 6)					
3 <sup>rd</sup> QTR – 2025 July-Se	ptember		DUE DATE	— <u> </u>	October 31, 202	5
AFFIRMATION: I hereby certify und correct and complete. If this return						
	, ,					-
Signature (x):	_	<del>-</del>	Date:			
			Date:			
	Signature of preparer (if ot	ner than tax payer)				
Name:			Title:		Pho	ne:
I I	Type or print	_				<del></del>