



BOROUGH of HATBORO

414 S. York Rd.
Hatboro, PA 19040

Business Privilege Tax Registration Form

Please note: This form is to be completed within ten (10) days and returned to the above address, attention 'BPT Department'

Name of Business	Business Address
Name of Business Owner	Name of Previous Owner (if applicable)
Mailing Address	Telephone Number
Type of Business	Number of Signs
Date Business Operations Began	
E.I.N. No. or Social Security No.	
Correct Taxing Jurisdiction (name of township/borough where business is located)	

Signature: _____

Please print: _____

Title: _____

Date: _____