



BOROUGH OF DRAVOSBURG
APPLICATION FOR MERCANTILE LICENSE
TAX YEAR 2020

UPON RECEIPT OF LICENSE APPLICATION WITH REMITTANCE FOR
THE SAME, VALIDATED MERCANTILE LICENSE WILL BE RETURNED

DUE DATE: January 31, 2020

Business Name: _____

Business Address: _____

Nature of Business: _____

If corporation, indicate name of resident manager: _____

If partnership or individual, indicate:

Name of owner or partner: _____

Home Address: _____

Business Phone: _____ Home Phone: _____

Federal Tax I.D. No.: _____

If business started subsequent to January 1, 2020, indicate starting date: _____

Give full name and description of concessionaire or independent dealer operating in your place
of business, including vendor machine operator:

Signature: _____ Title: _____

License Fee Schedule

Table with 2 columns: License Type, Fee Amount. Rows: Wholesale (\$5.00), Wholesale and Retail (\$5.00)

MAKE CHECKS PAYABLE AND REMIT TO:

KEYSTONE COLLECTIONS GROUP
PO BOX 489
IRWIN PA 15642
Phone: (724) 978-2867 or toll free (888) 328-0561
Fax: (412) 927-3646